

INTERNATIONAL POPULATION ISSUES

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International Population Issues, 10...

HEARING BEFORE THE COMMITTEE ON FOREIGN AFFAIRS HOUSE OF REPRESENTATIVES ONE HUNDRED THIRD CONGRESS

FIRST SESSION

SEPTEMBER 22, 1993

Printed for the use of the Committee on Foreign Affairs



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INTERNATIONAL POPULATION ISSUES

WEDNESDAY, SEPTEMBER 22, 1993

HOUSE OF REPRESENTATIVES,
COMMITTEE ON FOREIGN AFFAIRS,
Washington, DC.

The committee met, pursuant to call, at 10:11 a.m. in room 2172, Rayburn House Office Building, Hon. Lee H. Hamilton (chairman) presiding.

Chairman HAMILTON. The House Foreign Affairs Committee will come to order.

We meet today to focus on the important issues of international population growth. The purpose of today's hearing is to explore the basic questions concerning population growth: What do we know and not know about rates of population growth around the world? What elements should be included in effective international population policy? And what constitutes an effective family planning program?

The third international population conference is scheduled to take place 12 months from now in Cairo, Egypt. The first such conference was held in Bucharest in 1974. At that time, many developing countries did not recognize the impact that rapid rates of population growth could have on their economic and social development, while most developed countries argued that population growth was a major Third World problem.

By 1984, when the second international population conference was held in Mexico City, the tables had turned, and it was the United States that argued that population growth was a neutral factor in national and global development. Now, as nations prepare for the Cairo conference, there appears to be greater consensus that rates of population increase, as well as per capita rates of consumption, are issues which both developed and developing countries must address.

The United States remains the world's major provider of assistance for population and family planning programs. Funding levels for these programs will increase in the coming year, while other functional categories of assistance will remain constant or decrease. We do not yet have the details of the administration's rewrite of the Foreign Assistance Act, but it seems probable, if not certain, that population assistance will continue to receive high priority. Thus, as we begin the process of considering reform legislation, it is important to have a clearer picture of the task ahead for the United States in assisting other nations to formulate and implement population policies.

I want to express a word of appreciation to Congressman Tom Sawyer, who has become something of an expert on these matters through his service as chairman of the Subcommittee on the Census Statistics and Postal Personnel.

Mr. Sawyer, do you have any comments you would like to make at this time before we begin?

STATEMENT OF THE HONORABLE THOMAS SAWYER

Mr. SAWYER. Thank you, Mr. Chairman. I would like to thank you for your interest and leadership in both scheduling this hearing and inviting the participation of my subcommittee.

I always worry anytime anybody describes any of us in Congress as experts on anything. Specialists, perhaps, but experts I am not so sure.

Still, it is clear that the force and pace of global population changes are presenting the community of nations with a set of unprecedented challenges that are not well or broadly understood. That set change is affecting the relationship among nations and the ability of governments to address the needs of their own increasingly diverse and mobile populations.

The United States isn't immune from this either. We are facing changes as intense and as profound now as we have over the last 100 years. These changes are redefining how we live, who we are and where we are going.

Those kinds of changes also affect our policy choices over a wide range of issues. If we just look at what is happening with growing urban populations in the United States and recognize that such growth, particularly in developing countries, places enormous demands on governments' limited resources for even the most basic needs, such as providing clean water or disposing of waste.

Last year, as you mentioned, Mr. Chairman, the Subcommittee on Census Statistics and Postal Personnel held hearings on demographic trends and their policy implications. We look forward to the opportunity to build on those hearings and work closely with the Foreign Affairs Committee as the United States prepares for that once-a-decade opportunity to address these issues with the international community in Cairo next year.

So, again, thank you. I look forward to the working together with you.

Chairman HAMILTON. Thank you, Mr. Sawyer.

One of the Members of the committee that has had a very special interest with the population problem has been Mrs. Jan Meyers, and we have appreciated her input. She has a statement here which will be entered into the record without objection.

[The prepared statement of Hon. Jan Meyers appears in the appendix.]

Chairman HAMILTON. We are very pleased to have as our first panel here Cochairs of the Congressional Coalition on Population and Development—your timing is very good, Connie—and we are honored to have the Honorable Connie Morella and the Honorable Tony Beilenson who are the Cochairs of that important group.

Your remarks, of course, will be entered into the record in full. In your case at least, Mr. Beilenson, I have a printed statement, and you may proceed as you choose.

I am not sure which one of you wants to go first.

Chairman HAMILTON. Mr. Beilenson. All right, Mr. Beilenson. And after your remarks, if you would like to join us, we would be very pleased to have you, but we are especially pleased to have you participate as you open our panel today. Thank you very much. Mr. Beilenson.

PANEL I

STATEMENT OF HON. ANTHONY C. BEILENSEN

Mr. BEILENSEN. Mr. Chairman, I very much appreciate the opportunity to appear before the Foreign Affairs Committee today.

On behalf of the Congressional Coalition on Population and Development, which I have the privilege of cochairing for the 103rd Congress with our good friend here, Connie Morella, I would like to thank you and the committee for holding this hearing on what I strongly believe is the single most important issue facing humanity: The rapid rate of growth of the world's human population.

The world's population recently surpassed the 5.5 billion mark, and it is growing by almost 100 million people every year. When you and I were born, Mr. Chairman, if you don't mind my being a bit personal, the Earth's population stood at about 2 billion. Since then, it has nearly tripled. The next billion will be added in less than 11 years.

To put it another way: 24 hours from now there will be 260,000 more people on this planet than there are at the moment. Nearly 95 percent of them will be born in Third World countries which cannot begin to adequately take care of their current populations, for whom there are too few jobs, inadequate schools, inadequate health care, inadequate amounts of food, and usually very little if any individual freedom.

Future prospects, moreover, are even more staggering. The United Nations estimates that if fertility rates were to continue at 1990 national levels the Earth's population will double in just 30 years. Even if fertility drops from the current 3.3 children per woman to 2.8 children in 2025, quite a significant reduction, world population would still grow to 12.5 billion by the year 2050. And if effective action is not taken within this decade, as today's 3 billion children in the developing world reach their childbearing years, the Earth's population could nearly quadruple to over 19 billion people by the end of the next century.

This rapid growth underlies virtually every environmental, developmental and national security problem facing the world today.

The impact of overpopulation, combined with unsustainable patterns of consumption, is evident in mounting signs of stress on the world's environment. Under conditions of rapid population growth, renewable resources are being used faster than they can be replaced. Food production, for example, lagged behind population growth in 69 out of 102 developing countries for which data are available for the period 1978 to 1989.

And the burgeoning of the world's population is having an enormous deleterious effect in such other environmental areas as tropical deforestation, erosion of arable land and watersheds, extinction

of animal and plant species and the pollution, of course, of air, water and land.

In much of the developing world, high birth rates, caused in great part by the lack of access of women to basic reproductive health services and information, are contributing to intractable poverty, malnutrition, widespread unemployment, urban overcrowding and the rapid spread of disease. Population growth is outstripping the capacity of many nations to make even modest gains in economic development. In the next 15 years, developing countries will need to create jobs for 700 million new workers, which is more than currently exist in all of the industrialized countries of the world combined.

Mr. Chairman and Members, everywhere you look the prospects are staggering. Consider, for example, in a nation like Bangladesh with a population of about 125 million, about half of that of the entire United States, crammed in an area about the size of Wisconsin, Bangladesh which has no foreseeable hope of climbing out of its current desperate state of underdevelopment. Yet in less than 35 years Bangladesh will add another 100 million people.

Just to illustrate with respect to Bangladesh how huge the problem is, we are talking just in that one country—you may recall, Mr. Chairman and Members, that 2 years ago there was a terrible hurricane off Bangladesh. In one day 130,000 people lost their lives. Within 2½ weeks 130,000 more people were born in Bangladesh alone. That is the kind of problem that we are talking about.

Bangladesh is only one example. No continent remains untouched by this explosion. Egypt adds 1 million people every 8 months to a population that already they cannot feed. The turbulent Gaza Strip, which is much in the news these days, possesses the world's fastest rate of annual population growth. In Iraq, which comes in a close second, the average woman bears over seven children in her lifetime. Iran's population of 56 million, a troublesome area of the world, will swell to about 130 million in another 35 or 40 years.

Every day, every day in India, 50,000 people are born, and India's population has grown by almost 25 percent in just the last decade to 850 million people. Every 3 weeks, the population of Africa grows by more than 1 million people.

Again, according to the latest U.N. median projections for the year 2025, which is only now, Mr. Chairman, 31 or 32 years away, Nigeria will grow from 108 million to 280 million; Egypt, from 52 to 90 million; Ethiopia perhaps anywhere from about 50 million to 125 million; Iraq, from 19 to 50 million; Iran, from 55 to a hundred and some million, as I mentioned; India, up to almost 1.5 billion and will probably surpass China; Brazil, 150 million now to 246 million; Kenya, from 25 million to 79 million; Mexico, from 92 million or so to 150 million.

Current U.N. projections for the year 2025 show that Nigeria will have more people than the United States, Iran almost as many as Japan, Ethiopia with nearly twice as many people as France.

So these are—I mean, these are things that are happening right now, Mr. Chairman, and on and on and on. Every impoverished, hopeless and desperate country in the world will see its population double or more in the next 30 or 35 years.

To be blunt about it, as Richard Gardner has recently written, nobody—and I quote him—has the slightest idea of how to provide adequate food, housing, health care, education and gainful employment to such exploding numbers of people. Especially when they crowd into some megacities of the Third World like Mexico City, Cairo, and Calcutta.

Again to quote him, the growing numbers of desperate poor will only accelerate the ferocious assault on the world's environment now under way in Africa, Asia and Latin America. Can anyone doubt that, even if these median growth figures are realized, our children and grandchildren will witness unprecedented misery, worldwide violence and a tidal wave of unwanted immigration throughout the world? End quote.

Overpopulation, however, is not a problem for lesser developed countries only. Rapid population growth in already overcrowded and undeveloped countries in the world has given rise to an unprecedented pressure to migrate as workers seek more hopeful and decent lives for themselves and their families. According to the United Nations Population Fund, over 100 million people, or nearly 2 percent of the world's population, are international migrants, and countless others are refugees within their own countries. Many of the world's industrialized nations are now straining to absorb huge numbers of people, and in the future, as shortages of jobs and living space in urban areas and resources such as water, agricultural land and new places to dispose of waste grow even more acute in developing countries, there will be even greater pressure to emigrate.

As a Member who represents part of the Los Angeles metropolitan area, I have been able to observe up close the effects of these immigration pressures. Communities in Los Angeles county, where enormous numbers of both legal and illegal immigrants are settling, are literally being overwhelmed by the burden of providing educational, health and social services for the newcomers. And the problem is only going to get bigger. Largely because of immigration, California's population is expected to grow from 31 million, where it stood 2 years ago, to 63 million by the year 2021. It is going to double in the next fewer than 30 years.

Mr. Chairman, we know—we know what is required to defuse the population explosion: more economic development in the developing world, better education and employment opportunities for women and universal access to affordable, quality family planning services. A recent Demographic and Health Surveys study indicates that in most developing countries more than half of the married women do not want any more children. Tens of millions more would like to delay subsequent births, but at least 120 million married women are not using contraception largely due to lack of availability, even though they wish to avoid pregnancy.

To address this urgent need, Connie Morella and I, along with Senators Jeff Bingaman and Alan Simpson, have introduced the International Population Stabilization and Reproductive Health Act, which would make the goal of population stabilization—which would make the goal of population stabilization, along with the improvement of women's and children's health, a primary purpose—a stated and primary purpose of American foreign policy.

Many groups and individuals with broad experience in population matters have spent a great deal of time and effort helping us to develop this legislation, and the result, we believe, is a really comprehensive and workable approach to population stabilization and reproductive health.

Our bill seeks to focus U.S. foreign policy on a coordinated strategy that will bring about the widespread availability of contraceptive services and health programs as well as educational, economic, social and political opportunities necessary to enhance the status of women. It sets specific health objectives, program descriptions and funding targets to guide U.S. population programs and expands U.S. efforts for the prevention and treatment of AIDS and other sexually transmitted diseases. Authorization levels are consistent with the recommendations of the Amsterdam Declaration, the blueprint issued by the 80 governments, including the United States, at the 1989 United Nations Amsterdam Forum on Population.

The legislation would also increase U.S. commitment to providing universal access to basic education and a number of other things which are before you, Mr. Chairman, in our prepared statement, and I will skip over part of it.

Population growth is an enormous problem, but we can solve the problem if we make a determined effort to do so. Over the last three decades—and this is the hopeful news that people need to know—staggering as the problem is, as the figures are over the last three decades, population programs have, in fact, been remarkably successful.

In general, average fertility falls by about one birth for every 15 percentage-point increase in the number of married couples who use contraception. Since the early 1960's, contraception use worldwide has gone up from roughly only 10 percent of couples to over 50 percent, an enormous increase. Over the same period, the number of births per woman dropped from six to about 3.3, almost half the fertility rate of just one generation ago, an immense improvement.

The effects of these efforts are already apparent. A study in the 1992 State of World Population, published by the UNFPA—examining the linkages between population growth rates and economic development—shows that those countries which took early and effective action to slow population growth in the 1960's and 1970's did significantly better in the economically difficult years of the 1980's. In fact, countries with slower population growth saw their average incomes per person grow 2.5 percent a year faster than those with more rapid population growth.

Education and access to contraception would also have a positive effect on both infant and women's mortality rates. Worldwide, the combination of better birth spacing and the elimination of births to adolescents could avoid 20 percent of the 15 million deaths a year to children under 5. Moreover, adequate family planning could reduce the enormous number of deaths from pregnancy-related problems, which the World Health Organization estimates to be the cause of between 20 and 45 percent of all deaths among women between 15 and 49 in the developing world.

But time is of the essence, Mr. Chairman. May I leave you with this thought, if I may be so presumptuous. Time is of the essence.

How quickly we provide worldwide access to family planning is crucial. Like compound interest applied to financial savings, high fertility rates produce ever-growing populations.

Let me give you two examples which I think are pretty compelling, Mr. Chairman.

If a woman bears 3 children instead of 6—the woman bears 3 children instead of 6 and her children and grandchildren do likewise, she will have 27 great grandchildren rather than 216.

If Nigeria, which now has 109 million people, more or less, reaches replacement fertility by the year 2010 rather than 2040, 30 years later, as is currently projected, its eventual population will be 341 million rather than 617 million.

So what we achieve in the way of making family planning services available in this decade will determine whether world population stabilizes at double or a little bit more than today's level or triple that level or more.

Slowing population growth is fundamental to everything else we do to improve living conditions abroad and to protect our own national interests. All our efforts to promote peace, security and the well-being of people around the world will be ineffective unless we successfully address this problem. Our legislation seeks to do that.

Mr. Chairman, however this committee proceeds with changes in foreign aid legislation, we hope you will give the provisions in our bill your careful consideration. We have spent a lot of time with a lot of help, as I mentioned earlier, putting it together. I think we have got some useful and workable suggestions there and that you will make population programs a foreign policy priority of the United States. Our determined efforts to address the population problem now, during this decade, will make all the difference in the world in the kind of world we leave to future generations.

Thank you very much for giving me this opportunity to be here.

Chairman HAMILTON. Thanks very much, Mr. Beilenson. That is a very strong, powerful statement.

Mr. BEILENSEN. I feel even more strongly about it than I expressed here today.

Chairman HAMILTON. Your sense of intensity about it comes through. We fully understand the reasons for that.

Mrs. Morella, would you like to begin your testimony?

STATEMENT OF HON. CONSTANCE A. MORELLA

Mrs. MORELLA. Thank you.

Mr. Chairman and Members of the Foreign Affairs Committee, I certainly applaud your recognition of the growing impact which population issues have on our ability to pursue our Nation's foreign policy objectives and to maintain the quality of life of citizens of the United States. And so I appreciate the opportunity to appear before you and the fact that you are focusing this full committee hearing on population and its implications.

I associate myself with the remarks of Congressman Beilenson who has, even before I was elected to Congress, displayed such a tremendous passion for the critical need to come to grips with population and development, and I applaud him for the leadership that he has shown in this.

As has been mentioned, Congressman Beilenson and I are the current Cochairs of the Congressional Coalition on Population and Development. This is a bipartisan group of more than 50 members founded in 1985 to serve as an informal clearinghouse for members and staff on family planning issues and issues of population and development.

Current global population numbers some 5.5 billion people. You have heard that. It is worth reiterating. It is growing at a rate of 100 million per year. Ninety percent of this growth is taking place in the developing world. Continued global population growth at current rates, according to Johns Hopkins University's Population Reports, will lead to a 50 percent increase in global population by 2025. By the end of this decade, half of the world's developing countries will be unable to feed their own people. And within 20 years, developing countries' carbon dioxide emissions, which are the most important contributor to the escalation of the greenhouse effect and global warming, will triple.

Five hundred million women worldwide do not have access to adequate family planning services. In addition, according to the International Planned Parenthood Federation, many of the world's 15- to 19-year olds are sexually active, but few have access to quality family planning services. However, estimates indicate that the current rate of global population growth would decrease by 30 percent if women were able to have only the number of children they wanted.

These and other reports and studies on population growth and its effects believe the Reagan administration's assertion at Mexico City that population growth is a neutral factor in economic development. And they underscore, as the Rio Conference and other efforts have made clear, that population growth is a critical factor in environmental degradation and sustainable development programs.

It is also increasingly evident that any successful efforts to address these problems must include efforts to empower women, providing them with the ability to exercise control over their own lives by assuring them access to reproductive and other health services and access to educational opportunities. The status of women in a particular country directly corresponds to its ability to achieve sustainable development and reduce fertility rates.

The inability of women, especially poor women, to access basic family planning services and information undermines women's struggle for self-determination, contributes to death and suffering among women and their children, puts pressure on the land, forests and other natural resources on which many poor families depend for their survival, and in other ways inhibits the ability of families to lift themselves out of poverty.

The impact of human population growth, combined with widespread poverty, is evident in mounting signs of stress on the world's environment, particularly in tropical deforestation, erosion of arable land and watersheds, extinction of plant and animal species, global climate change, waste management, and air and water pollution.

Although many societal and economic factors affect family size, organized, accessible and affordable family planning programs have the most rapid and strongest effects on birth rates because they en-

able women and their families to control the timing and number and health of their children.

After more than 25 years of experience and research, the actions needed to bring about a rapid decline in birth rates are well documented. Primarily, the ability to exercise reproductive choice must be expanded through the broader dissemination and choice of family planning services which involve the community, especially women, and which meet the needs and values of those who use them.

We are fortunate in that we have an administration which recognizes the importance of population issues. It has reorganized the State Department to give greater emphasis to population stabilization in U.S. foreign policy, and the President has chosen an outstanding advocate of environmentalism and population stabilization, former Senator Tim Wirth, to overseeing these efforts.

Earlier this year, as was mentioned, Congressman Beilenson and I introduced the International Population Stabilization and Reproductive Health Act. We have been joined on the Senate side with Senators Simpson and Bingaman, who introduced similar legislation.

H.R. 2447 will establish accessibility to family planning services and information as a principal objective of U.S. foreign policy. Of critical importance is the bill's emphasis on improving the health, social and economic status of women as essential for any country's economic progress.

The legislation also takes into account that women who participate in the social, economic and political affairs of their communities are more likely to exercise their choices about childbearing than those who do not.

The International Family Planning and Reproductive Health Act makes the point that comprehensive population efforts which include both family planning services and economic development activities achieve lower birth rates and stimulate more development than those which pursue these objectives independently. It highlights issues such as education and literacy, infant and child survival, and gender equality as the most important long-term influence in reducing birth rates, and it authorizes funding for support of basic health, nutrition and education services for women and children.

The legislation represents a compromise among a number of interested parties including population, women's health, and environmental groups, as well as legislators on both sides of the aisle, Democrats as well as Republican. The bill represents a huge step forward from the policies and attitudes of the 1980's, and it will help to restore U.S. leadership on this vitally important issue.

I hope the committee will carefully deliberate the merits of the legislation as it reviews current U.S. and international population stabilization and family planning programs and contemplates any changes in our U.S. assistance programs.

Again, I want to thank you, Mr. Chairman, for the opportunity to appear before you today. I know that Congressman Beilenson gave you some very dramatic statistics which are all too accurate. I look forward to hearing the comments of the other panelists and

working with this committee and the Congress in trying to come to grips with this critical issue of population. Thank you.

PANEL I DISCUSSION

Chairman HAMILTON. Mrs. Morella and Mr. Beilenson, we are grateful to you for your leadership of the coalition and for your testimony this morning. It is very compelling.

The statistics that you have put before us are just astounding, startling in their impact, and the point that both of you have made about the manner in which population growth underlies all of our efforts in development and even national security problems is very powerful. So we are most grateful to you for the way in which you have started off our hearing this morning on population issues.

I want to say to you that the initiative you have taken on the bill, the legislation that you have identified and described, is important. And I think both of you feel that population matters should be a high priority of American foreign policy. I agree with that. I think most Members of this committee do. And you have certainly highlighted it for us. And that legislation will be a guide for us.

As you know, the administration is getting ready to send to us, I hope sooner rather than later, a reform of the foreign aid program which Mr. Gilman and I and others have strongly supported. And I think both of us want to see the population problem given a lot of attention in those reform efforts.

So thank you for your testimony, and I will recognize the Ranking Member, Mr. Gilman.

Mr. GILMAN. Thank you, Mr. Chairman.

I want to commend you for arranging this hearing on such an important international issue. I also want to commend our colleagues, Congressman Beilenson and Congresswoman Morella, for taking time out of their busy schedules to appear before the committee and for drafting what I consider to be important legislation. I commend you for your extensive efforts in that direction. I hope that our committee will be able to be of help with regard to this legislation.

I think we all recognize that population growth is becoming one of our more critical issues, impacting not only domestically but on the world society, and it will affect us in many ways: poverty and food supply, international economy, environment, health of our children, women around the world being influenced by population growth. And it is critical for all of us, as we try to examine future policy, to understand its significant relationship to our global societies.

I believe our hearing comes at a key time since foreign aid reform is on the platter, and we hope to get some reforms before the end of this session. Also, 1994 is the year for the decade's U.N. International Conference on Population and Development when all of the nations will be examining global population operations.

So we welcome your expertise and your recommendations.

I would like to ask both of our panelists if and when AID is reorganized—and it looks like it is in the process of being reorganized—where do you think the population issue should fit in, if you have any thoughts about that. And population assistance; should

that be a separate account from all other development assistance? Should population officers be assigned to AID missions overseas? I would welcome your thoughts about that.

Mr. BEILENSEN. I can't be of much help, if I may say so, Ben. It has been 15 years since I have served on your fine committee, and you folks and your staff know a good deal more about where the efforts ought to be put perhaps than I or perhaps than we. I don't mean to speak for Connie as well.

It is important that this be a major component, part of foreign policy, that we keep it in mind, that we keep pushing it, that it become, if I may say so, as we are suggesting in the authorization levels that we are proposing in our bill, a larger fraction of our AID dollar. But how you handle it and where in AID or where in the department you put it is up to you folks in the administration.

Mrs. MORELLA. I might also comment that population issues are part of education. They are part of health. So they are intertwined in myriad ways with what AID does.

Mr. GILMAN. Let me ask you, do you think that organizations such as the World Bank and the U.N. Population Fund would have a greater impact than AID in encouraging a broader approach to population policies?

Mr. BEILENSEN. I guess it is obvious, if I may answer quickly, that everybody concerned about development throughout the world has got to be involved in this particular process and everybody has got to be pushing it and be concerned about it.

Again, you all are far more current with respect to how these international bodies and multilateral bodies have been acting with respect to these particular problems. My impression is they have become far more sensitive to it in recent years, but, clearly, it has got to be the major focus of the entire world and the—all the donor nations and both our bilateral and our multilateral efforts to help other folks abroad.

We are wasting our money and our efforts, and we are not helping them at all if, along with whatever other help we are giving them, they don't do something with our help, I suppose, I hope, about their population growth.

Mrs. MORELLA. I think they should all be involved, but I think the United States should show leadership in terms of making sure that they are involved by our example.

Mr. GILMAN. You both talked a great deal about education, primarily for the women around the world. What systems should we take to try to encourage the men to get involved in this kind of effort?

Mrs. MORELLA. Men have to be involved in it also. It has been said that, in developing countries, "when you educate a man you educate a person. When you educate a woman you are educating a family."

I think when you look at the whole issue of empowerment, it is clear that, if you can help with the health of the woman in terms of her access to family planning—and we are also looking at such things as microbicide research, which would be a chemical barrier that a woman could use to prevent AIDS, a real problem internationally, and other sexually transmitted diseases. And to empower the women in terms of teaching them what family planning

is all about, teaching them in terms of assisting and educating their children, will immeasurably assist in elevating entire societies.

So educate the men, too, but I think it is important to look to the women who heretofore have been kind of relegated to subservient, ignorant positions.

Mr. BEILENSEN. Mr. Gilman, you are right about the men, but women are apparently the key. You will hear, I hope, from one of your subsequent folks who is testifying today stunning statistics which I may not recall quite correctly bearing directly on this. If a young woman in a developing country has as much as 6 or 7 years of education, even at the earliest levels like kindergarten through the sixth grade, she will have on average half as many children as if she did not have just those 6 or 7 years of early education.

So, obviously, there is some connection between the two.

Mr. GILMAN. I want to thank you again for your efforts and for raising the consciousness of the Congress with regard to this important problem. Thank you.

Chairman HAMILTON. Mrs. Meyers.

Mrs. MEYERS. Thank you, Mr. Chairman.

I would like to thank both Mrs. Morella and Mr. Beilenson for being here today.

I have submitted my statement for the record, and so I won't go through all of it this morning.

But I would just like to say that I was quoted in a newspaper article earlier this week as saying that I thought we ought to end foreign aid to nations that didn't lower their birth rate or something like that. I have never advocated that.

However, I do think that we should utilize our foreign aid to help countries help themselves and for a couple of reasons: one, because of the misery and problems that frequently overpopulation will cause to that country itself. And the second reason is because I do think foreign aid becomes more acceptable in this country.

It is difficult to justify giving a half a billion or a billion dollars to a country in humanitarian aid if they are unwilling of themselves to take some steps to adjust the population in their country to the resources. I don't want to get in the business of telling any other country what their population growth rate should be. I do think that to prevent misery and conflict we should help them with our foreign aid to adjust population to resources.

Mr. BEILENSEN. May I followup pretty briefly, Mr. Chairman, on that thought just for a moment?

Chairman HAMILTON. Sure.

Mr. BEILENSEN. I am being a little presumptuous, but perhaps it will be helpful.

Foreign aid, as one doesn't need to tell Members of this committee or any of us, is not a very popular thing back home. Very few amongst our constituents want us to spend more money, let alone as much as we are currently are.

I am here to tell you that foreign population aid is very popular and not for all the wrong reasons, not because people are racist or whatever, but because people really do understand that we have got to get control of the world's population. They understand intu-

itively, especially older people who have been around and have seen the changes in the world and even their own country's change.

I wrote an op-ed piece that was published in the *Los Angeles Times* about it I guess 3½ years ago now—a little tongue in cheek but not really, a little facetious, but not really—suggesting that we end all bilateral economic aid to developing countries and offer them instead if they want it, only if they want it, family planning aid, the reason being that, literally, we are wasting that money. Humanitarian as it is, nice as it is to help—we want to help—it is hard for me to say this because, along with all of you, I am compassionate. I care about folks around the world.

When you think seriously—you send 20 million, 80 million, perhaps even as much as 100 million, to some developing country, and you get some irrigation projects started. You help them develop. Who knows if the money goes to the right people? It seems like the folks at the top make the money, and the folks at the bottom don't get helped a lot.

Even if it works, you are helping some modest fraction, some limited number of people in that country. Meanwhile, over the next 25, 30, 35 years, its population is doubling, and their needs are going to be more than twice as much then when they are going to be asking for help still. By then, things will be so out of control that there will be absolutely no hope.

At times one feels a bit hopeless now. But if we get involved in a serious manner now we can do something about this. I really do think you will find large support, as I think you ought to find for foreign aid, if an increasing fraction of it goes to family planning, not forced upon anybody but only for those countries who want it.

This Amsterdam Plan with which we agreed—which I referred—we, both of us referred to, Connie and I—calls for authorizing, appropriating close to \$800 million in family planning assistance by fiscal year 1995. That is a little over a billion—a billion two—6, 7 years out from now. But that is a tiny amount of money compared to the good it will do and the effectiveness of it compared to all the rest of our foreign aid, if I may say so, Mr. Chairman.

Chairman HAMILTON. OK. I think I will just open it up for any comments or questions to my colleagues, Mr. Hastings and then Mr. Rohrabacher. Mr. Hastings.

Mr. HASTINGS. Mr. Chairman, like everyone else, I commend you for giving us this opportunity to hear from experts witnesses this morning, and I certainly wish to compliment our colleagues, Mrs. Morella and Mr. Beilenson, on their fine commentary.

Mr. Beilenson.

Mr. BEILENSEN. Sir.

Mr. HASTINGS. I don't share your view reference humanitarian aid, and I don't share the view that you expressed in your bilateral—your op-ed about bilateral aid.

I am a new Member to Foreign Affairs and had the fortune or misfortune of visiting the Horn of Africa very recently, along with Congressmen Johnston and Payne.

The \$36 million that this committee called for with reference to United Nations—the United Nations Population Fund is in my view woefully inadequate. \$36 million could be used in Uganda alone. And when I spoke with the Health Director, he understands

these problems. I spent the greater portion of the morning with him in Uganda.

And when I had an opportunity to meet with President Museveni, he has a different view with reference to population. He talks about the tribalism factors extant in his country that disallow some of the educational offerings that we would want to present. How in the world are we going to be able, with the paltry sums of money, to educate people who don't have any education at all?

And the reason I support humanitarian aid—if we want to get education to them—I rode on some roads from Uganda to Sudan that there is no way on Earth that anyone needs to be back out there. But yet there were teeming masses of people living there.

And my concern is how do we do this. My frustration level is probably higher than yours, Tony, because I just—unless the people in this body are willing to make the commitment and have the understanding that what affects everybody in this world affects each and every one of us as well in America as elsewhere, then there it is no way on Earth we are going to be able to do what is needed to control world population.

I just invite your response and thank you, Mr. Chairman.

Mr. BEILENSEN. You are absolutely right, and I really have no argument with you. And in a sense I misspoke when I said—when I said—originally proposed that I was doing it a little bit tongue in cheek.

I am one of those who feel strongly we have got to remain heavily involved in the world. I think the world needs our leadership, if I may put it that way. It is perhaps not the best way of putting it, but I think the people do look to us, and I am supportive of all of the specific efforts you mentioned and a lot of others, always have been and always will be.

I don't know how long, however, we can keep getting enough support from our colleagues because of pressures they feel from back home.

All I am suggesting is because—you, too, refer to the teaming masses. That remains the basic problem. And unless we help people if they wish, if they want aid for those purposes, we will never solve the kind of specific problems that you spoke of, sir. I have no argument with your description.

Mr. HASTINGS. Thank you.

Mrs. MORELLA. I think we also have to get these other developing countries to recognize the importance of population growth so they can establish some priorities. We can establish it in our foreign aid. They can establish it within their countries. And, you know, providing more of our foreign assistance for this—I know it is a minuscule amount, but when you think of the family planning procedures and education, some of that wouldn't be that expensive over the long-term if only the countries would be concerned about it.

Mr. HASTINGS. But, Connie, we don't do a good job right here in America. In my district, we can't get family planning. People are screaming all over the place. How are we going to educate the world when we are not even educating ourselves?

Mrs. MORELLA. I agree. I think we have to realize what John Dunne said, no man or woman is an island. We are all connected.

We have got to show that example here. We are pushing it domestically, too.

But I think as foreign aid it should be certainly a consideration in terms of the world situation.

Chairman HAMILTON. Mr. Rohrabacher and then Mr. Sawyer.

Mr. ROHRABACHER. I appreciate your testimony today.

I would like to ask both the witnesses, where is the population explosion taking place? Give me some countries that you believe are the problem countries.

Mr. BEILENSEN. Well, it is taking place in most of the developing portions of the world, Dana. I guess just prior to you coming in I read off a list of how populations were exploding in a number of different areas.

Mr. ROHRABACHER. What specific countries are we talking about?

Mr. BEILENSEN. Almost all specifically.

Mr. ROHRABACHER. India? China?

Mr. BEILENSEN. China less than India. India will surpass in several years. They are going from 850 million to 1.44 billion by the year—I forgot what I said—2030 or 2040. Nigeria is going to more than double over the next 30 years.

Almost every developing country's population will—unless some intervention gets involved, we get involved, they get involved with the problem in the next—in this decade is going to at least double over the next 30 to 35 years. A million people are added every 3 weeks in Africa. In India 50,000 people are added every day. In the world, 260,000 people are added every 24 hours.

Mr. ROHRABACHER. So India, China, Nigeria and developing countries.

Mr. BEILENSEN. And everybody else. Egypt, Iran, Iraq. The Gaza Strip has the highest birth rate.

Mr. ROHRABACHER. In those areas that we are talking about, you know, those major areas of population explosion, now, could the technology that has been developed in the last two decades—I understand there is more technology where women can now wear an implant of some kind that will prevent them from conceiving a child. Would this be—is this part of the solution that we are talking about here?

Mr. BEILENSEN. Any kind of contraception which the people involved might want to make use of would help solve the problem and would probably to a great extent.

The problem is lack of access. People who want contraception would use it if they had it available to them. And we stated statistics at the outset saying that there are more than 120 million married couples in the world in developing nations alone who wish to have access, wish to space their births or they wish to have no more children. Norplant would be helpful, but so would all the older, more basic forms of contraception.

Mr. ROHRABACHER. But there is technology now with these implants to actually permit people—there is a certain expense involved in providing this for people and a certain commitment that is necessary in terms of expending those funds and also in terms of getting those people to accept that.

What I would like to know is why is it our responsibility as Americans when, basically, we are going broke? I mean, let's face

it, our country is bankrupt right now. Anybody who thinks different is in a dreamland. Why is it our responsibility with a bankrupt country then to spend that specific money so that those people can have contraception when their own governments are unwilling to spend it?

Mrs. MORELLA. The cold war is over now. But if we don't get a grip on population, it may not be. It may reemerge.

Think of it if you are going to have the expansion of population without the education and the health facilities, you have the potential for uprisings, for instability in the world. And I see this in the Middle East, too, when you talk about the expansion.

So there is a connection that way. There is a humanitarian connection. The whole foreign aid need is going to be even greater.

Mr. ROHRABACHER. Mrs. Morella—Connie.

Mrs. MORELLA. Yes, Dana?

Mr. ROHRABACHER. It affects their country. More than any other country, it is affecting their country. Our people—right now, we have our own major problems providing health care. We have our own major problems here. As I say, we are going broke.

Why is it, when it affects their country so much more than ours, that they are expecting to have the resources taken from our country to give to them in order to provide something that will affect something so important in their country? As a given—for example, you can have implants or some type of birth control.

Mr. BEILENSEN. We are talking about real money. But, to be serious about it, if you don't mind my putting it this way, we are talking about the commitment after several years from you of about a billion two or a billion and a quarter, but that is a lot of money, but it is not a lot a money either compared to the problems we are trying to solve. You can find that money, as I suggested, perhaps elsewhere in existing budgets. This is money—this is our opinion. You don't have to accept it.

Mr. ROHRABACHER. Why not find it in their budgets? For example, India and China spending billions—

Mr. BEILENSEN. In a developing world—

Mr. ROHRABACHER. India, for example, is spending even more money on weapons than they have in the past. How can we possibly take seriously a request from India? When they are spending more money developing nuclear weapons, which we don't want them to do, and they are unwilling to put money into contraception for their own people, why should our people have to bear the cost?

Mr. BEILENSEN. That is a perfectly legitimate question, and a lot of the developing countries in the world are spending far too much money on weapons. They are coming down a bit now because the pressures of the cold war have come off them.

But the contributions to contraception throughout the world from developing countries is about 80 percent of the amounts which currently are being spent and which will need to be spent. We are suggesting under the Amsterdam Convention, which was approved in the United States and 79 other countries—industrialized and others—three or 4 years ago now, that about 20 percent of the contribution to this great need—

Which does have an impact on us. I mean, you know the impact. You have written about it. You have written letters to the *Wall*

Street Journal, for God's sake, about the impact that is directly—it is a demographic problem, Dana, you know that. Folks come here because they can't provide adequate jobs in the countries where they grow up and live so they come seeking help here. And you know, because you have quoted the statistics, how much it costs us to provide health care and whatever. I mean, the billion dollars will be money very well spent.

Mr. ROHRABACHER. But the bottom line is if India and those other countries, China or whatever countries we are talking about in the Third World—not only India and China but some of those other Third World countries are squandering their money.

Mr. BEILENSEN. We do, too.

Mr. ROHRABACHER. A \$3.5 million increase for our spending on this problem when it affects them more than anybody else. Aren't we basically subsidizing their arms and weapons by not giving them an out on spending—

Mr. BEILENSEN. Dana, what have you been saying is the biggest problem in southern California?

Mr. ROHRABACHER. No doubt about it: illegal aliens.

Mr. BEILENSEN. Does it have anything to do with population growth in other countries nearby us? Come on. You say it doesn't have an impact on our quality of life and our expenditure.

Mr. ROHRABACHER. It goes deeper than that in Mexico. There are a lot of other problems in question. Although birth control is certainly an important problem in Mexico, when you are talking about a general expenditure of \$400 million—and we are not talking—if you are increasing your military spending, if you are going to produce more hydrogen bombs in India, we are not going to give you the money for something you should be doing yourself. I think that is a reasonable position.

Chairman HAMILTON. Mr. Sawyer.

Mrs. MORELLA. We can state this within our priorities as foreign aid moves ahead.

Mr. HASTINGS. Would the gentlewoman yield?

Dana, it is pay me now or pay me later. It is just that simple.

Mr. ROHRABACHER. Thank you. Mr. Sawyer.

Chairman HAMILTON. Mr. Sawyer.

Mr. SAWYER. Thank you, Mr. Chairman.

The conversation that we just had reminds me very much of a conversation that took place in Mr. Gilman's district last June when a number of us who serve on this committee and others met in last year's version of what is a regular meeting between members of the European Parliament and members of this House of Representatives. And because of the changes that were taking place then, they asked us to talk briefly about how we viewed the events of South Central Los Angeles and its consequences more broadly across the country.

And among the responses, I offered the suggestion that the phenomenon in South Central Los Angeles was really something that we have seen not only there but in other places in this country and other places in the world; That the competition between older wealthier, indigenous, homogeneous populations and younger, more mobile, poorer, hungrier, more aggressive populations competing for very limited resources under pressures of family growth rep-

resented a model that the European Community certainly ought to be able to identify with, as they are facing precisely the same kinds of pressures in terms of migration from the East and perhaps even greater pressure in terms of migration from northern Africa.

Indeed, this isn't the sort of thing that is happening just in Europe or the United States but is also happening across the Pacific Rim and elsewhere throughout Oceania. And that those kinds of pressures touch every single one of us in ways that are profoundly difficult to measure, but whose fundamental importance is becoming global.

The competition that we faced between East and West for better than the last 50 years is being replaced by a demographic set of pressures between North and South, between developing and developed nations and among population groups across and within those nations.

I think you are just absolutely right on the mark, both of you, when you suggest that the small investments that we make now can do a great deal toward stabilizing the single most powerful, pervasive, destabilizing factor in the world: ourselves as human beings.

Thank you, Mr. Chairman.

STATEMENT OF HON. THOMAS PETRI

Chairman HAMILTON. Any further comments?

Mr. Petri, we are very pleased to have you with us this morning.

Mr. PETRI. Very briefly, I am here basically at the invitation of my Chairman from Post Office and Civil Service, Mr. Sawyer. Our committee has interest in collecting information on population. I did have one observation only. We all look at things with differing background and our own experience. I served as a Peace Corps volunteer and traveled in India a generation ago, and at that time, population control devices were readily available and in fact there was a program to subsidize people using them, but the difficulty would be people would pay to get an IUD and then pay the midwife to get it taken out and then go back and pay to put one in again.

My sense is it is really not a question of spending a lot of money directly on technology and population control. It is a question of trying to help along peoples' attitudes changing so they want smaller families and when we see Singapore or other places in the world that have developed, as they develop, they go through a big change and suddenly they start worrying about negative population growth, not overpopulation.

It is not because of sudden application of technology or population control programs. It is because of incentive changes, peoples' attitudes changing as a result of opportunities. I guess my only observation is that whether it is here, at home, or around the world, if peoples' attitudes don't change, we are not going to control population. If they do change, you don't need to worry about all of these government interventions.

So I would argue an indirect approach might be more effective over time than a direct approach, just based on the last 25 years and where we have seen population pressures relieved and where they have continued.

Mr. BEILENSEN. You are correct, but you need a combination of things, availability of contraceptive services for women who want them and to free up women to be able to make decisions to control their own lives, education, opportunities for jobs, whatever brings that about.

Ms. MORELLA. No doubt there is a need for education and in countries like Russia that don't have access to family planning, you have abortions, you have women who have had eight abortions. This is going to enhance the health benefits, but you have to educate the nations and we have to take a lead in that.

Chairman HAMILTON. Any further questions? Thank you.

The second panel includes Dr. Barbara Torrey of the National Research Council, Commission on Behavioral and Social Sciences and Education; Ms. Judith Bruce from the Population Council; and Peggy Curlin, president of the Centre for Development and Population Activities.

PANEL II

STATEMENT OF BARBARA TORREY, COMMISSION ON BEHAVIORAL AND SOCIAL SCIENCES AND EDUCATION, NATIONAL RESEARCH COUNCIL

Ms. TORREY. Mr. Chairman, I am Barbara Torrey. I am now at the National Academy of Sciences. I used to be at the Population Reference Bureau and Census Bureau. The numbers I will use will reflect work that has been done in these three offices.

In the few minutes I am going to talk, there will be 2,700 people born in the world; 970 will die. That is going to be an increase, a net increase in the world of 1,700 people. It is a large increase, larger than any other time in human history.

Chairman HAMILTON. During what period of time?

Ms. TORREY. In the next 10 minutes.

I will talk fast. I am not going to read my testimony. I am going to use the charts that accompany the testimony as an easy way of making some of my points.

A previous presenter described how much faster the population growth is going to be; my figure 1¹ actually shows that it took virtually all of human history before 1800 to get to the first billion people. It took 12 years to go from the fourth billion to the fifth, and in the next 40 years, every decade we will be adding almost a billion people. That is like adding China to the world population every decade.

This is unprecedented. You can see that it begins to slow down later, but we are facing something that we have never seen before in terms of what we are going to have to adapt to.

Figure 2 reinforces the comment that Representative Morella made, that over 90 percent of the growth is going to be in the developing countries; actually the United States is now the fastest growing developed country in the world. Yet when you look at chart 2, what you don't realize is that actually the annual rate of increase peaked in the 1960's and has been coming down as shown in chart 3.

¹ All illustrative material may be found on pp. 40-59.

You will hear people say the growth rate is coming down; we don't have to worry, and they are right, that it is coming down. That doesn't mean we don't have to not worry about it.

Figure 4 shows what the growth looks like in the developing countries. Africa and Latin America had similar size populations in 1950, and look at where they will be in 2050. Africa has been growing much faster than Latin America and will be continuing to grow after 2050.

In figure 5, I show you what I worry about. People worry in general and the older I get I try to worry more efficiently. What I worry about is the countries that are doubling very, very fast. Iran is going to double their population in 20 years; Zaire in 21 years. These are the countries that not only don't have the physical infrastructure to make adjustments that fast, they don't have the governance structure.

We have seen rapid population growth in the developed world. But we have the government structure to manage some of that. Many of us were democracies at the time and we could manage rapid population growth. These countries cannot.

Figure 6 goes to a point that several of you made about the role of men and women. Actually a lot of the social science research suggests that if you educate women you have a much more powerful effect on contraception and fertility than if you educate men. You can educate men from now until ever and you do not get the same drop in fertility. We have been increasing the education of women. The problem is that it has not been happening fast enough.

On Figures 7 and 8, you can see over a wide range of countries that the contraceptive prevalence rates are dramatically different by education of the woman, and as a result, the next figure shows you that the fertility rates of the women who have had a secondary school education are dramatically lower than the women who do not have that.

As a result, on figure 9 you can see the substantial increase of contraceptive preference that we have experienced around the world and in fact the National Academy of Sciences has recently published a five-volume study of the population dynamics in Africa. It documents for the first time that actually we are beginning to see an increase in contraception in Africa and a drop in fertility.

Figure 10 shows that the fertility rates have come down in many countries. The interesting thing about this chart is that it is not coming down nearly as fast as the contraceptive prevalence rate is going up. You really have a lag between when women start using contraception and that drop in fertility.

Even so, figure 11 suggests that we are seeing declines in fertility. That is the optimistic side of this is that in fact even though we worry a lot about the population growth, fertility declines can happen and do happen if we do the right things. It took the United States 58 years to go from a total fertility rate of 6 to 3.5. It took Thailand, Colombia, and South Korea 12 years to do the same drop.

These are phenomenal drops, partly because of large education programs for women and high contraceptive prevalence rates. It can make a huge difference in this area.

Figure 12 shows you what is likely to happen over time. These are the U.N. population projections. A very small difference in ultimate fertility rates makes a very big difference in world population. If you have just one-tenth of a child more, you get more than 2 billion more people in 2050. And that is just a 10th of a child per woman. A 10th of a child less and you have 2 billion less.

It is really striking how sensitive these numbers are to fertility. A lot of people ask me how good are these numbers? I am an economist, and these numbers are a lot better than economic numbers. They are a lot better than weather numbers. These are probably the best numbers we have going out into the future. You can pick your fertility rate, but these numbers are better than almost any other numbers we are working with in terms of trying to describe the future.

The next chart, which is figure 13, shows you what happens to the U.N. projections if you go out another hundred years and what difference those very small rates in fertility make over the long term itself. These are the 3 major variants and it goes from 5 billion to 20 billion, over 20 billion in 2150 itself.

Let me briefly summarize two more trends that are happening at the same time. Most people just focus on the total population numbers, but in fact while the population of the world is going to be doubling, the urban population is going to be tripling. We need to realize that we have another huge demographic movement happening underneath the world population total and we need to be thinking about that in terms of how to manage it. People ignore it or assume that it is going to slow down. It is actually picking up and we need to begin to do something with it.

One person talked about Bangladesh. Figure 15 shows the major countries of the world by density and Bangladesh is off the map in terms of its density. It is not increasing as fast as it used to, but it will double again in, I think, 40 years.

The interesting point on this chart is the second country, Japan. Of the first 10 countries, 4 of them are developed countries. So that density by itself is not an indicator of poverty or lack of economic development in itself. But the interesting part is that Japan, U.K., Germany, Italy became dense countries slowly. And the other countries are becoming dense countries very quickly. That goes back to what I am concerned about, which is the rate of growths.

The next two charts are the other trends underlying what we are describing, which is that we have a huge change in population structure. The number of children is going to be dropping, the number of aged increasing. What that means ultimately is that the median age of the world is going to be increasing. This is not bad news. For people who are middle aged and like it, getting the world to become middle aged is going to become a major benefit. People will be more productive. They can consume different kinds of goods and services. They need more sleep, so you have less crime.

There is a whole series of things that is going to happen in the world if we can continue to get the fertility rates to come down.

Let me finish with the last two charts, which is what to worry about.

Figure 18 shows you what the annual increase in world population is going to be over the next 50 years and the huge numbers

that we are going to have to figure out how to govern, how to feed, how to allocate resources.

My final point is on the last chart which is why should we care about this? People say to me 2050 is a long ways away. So I did an estimate of how many people alive today will be alive in 2050, and I was surprised. It is going to be 36 percent of people alive today will be alive then.

This is not a problem of the future. It is actually a current problem that people should be concerned about.

Thank you, Mr. Chairman.

[The prepared statement of Ms. Torrey appears in the appendix.]

Chairman HAMILTON. Before we go to Ms. Bruce, Mr. Rohrbacher has a question for Dr. Torrey. He has to leave.

Mr. ROHRBACHER. Looking at your charts, especially in terms of population of Africa, for example, I wonder if your calculations took into account diseases that—I have been told that Africa was going to be depopulated. I have been to hearings right here that said the population of Africa was going to go down to a minimal amount because AIDS was going to sweep Africa.

Ms. TORREY. We did demographic modeling on the disease and you do not see that. Even if you have a national HIV prevalence positive rate of 10 percent, which only 1 or 2 countries, maybe three are likely to hit, you would reduce their population growth rates from 3 percent to 2 percent. You still have large positive growth rates.

Part of the reason is that the average number of years from when you become HIV positive to getting AIDS is 10. So you can have a lot of children in those 10 years.

Mr. ROHRBACHER. So you did take that into consideration?

Ms. TORREY. Yes.

Mr. ROHRBACHER. Thank you, Mr. Chairman.

Chairman HAMILTON. Ms. Bruce.

STATEMENT OF JUDITH BRUCE, SENIOR ASSOCIATE, THE POPULATION COUNCIL

Ms. BRUCE. Mr. Chairman and distinguished Members, first I want to thank you for inviting me to speak today on population policy.

I work for the Population Council where I am a Senior Associate. The Population Council is an international scientific organization which has collaborated with developing country governments and with the international community for over 40 years in seeking solutions to population problems.

Over those 40 years, the Council has spent a good deal of effort and time working with family planning programs, but I am not here to speak about family planning programs, but rather the broader aspects of population policy, which we have not acted enough upon.

Population policy potentially encompasses many subjects and instrumentalities, but increasingly we find that it is equated in the public mind and in policymakers' minds with a narrow set of activities, fertility reduction programs implemented through family planning programs alone. It is what we know how to do.

We make claims for more investment in family planning programs—and they are justified—and then move, and to give tepid or somewhat incomplete or difficult-to-follow prescriptions of supportive social and economic measures.

Today I heard a good deal more vigor in support of those social and economic measures, but I think the social and economic measures should receive much more concerted policy attention. When the demographic crises are pictured with dramatic figures, it is comforting to think if we provide services, we will solve the problem.

The problem is that it neglects a great deal of what must be done if we are to reach population stabilization. Even governments which are gravely concerned about population growth—and there are many in the developing countries who are—have in general, I would say unnecessarily limited the scope of their activities in three ways.

They have made family planning a lonely centerpiece to their activities. They have focused their efforts almost exclusively on women, as if women's sexual and parenting roles are determined autonomously, and they have treated familial negotiations not only about fertility regulation but about the location of the costs of children as a subject out of the domain of public policy. We can and must do better than this.

I am the last person in the world to say that more support for voluntary family planning services of adequate quality is not needed, but I believe we risk over selling the potential of these programs. We estimate that if unwanted fertility were eliminated entirely we would move the developing world only one-third of the way toward population stabilization which is to say when people ask why is it important to deal with these other factors. You won't have unmet need unless you have people who actually want lower numbers of children.

The remaining two-thirds of expected growth in population will require explicit policy measures which deal with the other two components of population growth, peoples' desire for more than two children. For example, in Africa people typically say they want five or six children, not two children. Or in Latin America, Asia and North Africa, they typically say they want three or perhaps four.

The second component is population momentum which Barbara described a bit and complicated to explain except to say that even if we reach replacement level fertility tomorrow or if by 1995 every man and woman had two surviving children, the population would continue to grow for another many decades.

The estimates at the Council are that population momentum alone would account for nearly half of the projected population growth over the next century even if replacement level fertility is achieved in 1995. We must pursue the neglected two-thirds of population growth through selective, creative and morally sound social and economic investments.

It has been difficult, I know, to get support for family planning programs, but we must continue to fight for that. I don't think it should be as difficult to get support for the other measures we must take to slow population growth. They are politically attractive and they are the basis of good government. We are calling upon the

adult generation to share more actively with their children and to make better investments. We are calling for the elimination of gender inequalities in schooling and the marketplace. And we are calling for a more equitable distribution of rights and responsibilities, with respect to children, between men and women. Presumably no one can quarrel with that.

A major goal for all countries—and I think we have a good partnership relationship with many of the countries—is to work with them in moving beyond the current population strategy of simply offering services, to encourage them to find other explicit social and economic policy measures to which to give more attention and more resources to create the conditions for rapid voluntary fertility decline. The responsibility for encouraging demographic change should be vested at the highest levels of government planning rather than confined, as it currently is with family planning “only” approach, to ministries of health which have little policy voice in government councils and often claim leftovers in the budgetary process. Which is to say that when you begin to equate population policy with family planning programs you end up having population concerns carried out and dealt with solely in the health sector. Some of those concerns belong there, but population concerns belong in other sectors as well.

Development plans and national budgetary guidelines across sectors should be weighted in light of their population implications. The 3 percent that we spend on services for example needs the support of the other 97 percent. Let me make one more suggestion here. If we only exercise policymakers minds to deal with family planning services when those programs do not reach the goals set by countries, and they frequently don't, though they make some progress, when countries begin to stumble, they then move to targets and more quietly coercive policies. If we begin by saying here are all sorts of different ways you can deal with population, when family planning programs do not do their job to the point the government wants, they understand well maybe we should make more investments in girls education, maybe we should do more in the health sector, maybe we should think more about norms and procedures about child maintenance. We haven't really exercised the full range of people's mental abilities on this subject because we have allowed the identity of population policy to be family planning programs only.

I will review three closely related measures that I think could form part of a more comprehensive population policy. Some have been mentioned and on those I will spend the least amount of time.

In the first instance we must increase women's access to and control of modern economic resources to buffer them against the social and economic risks associated with delayed and low fertility. We must give special attention to girls and women aged 15 to 24, the pivotal cohort. They are in need of social support, economic opportunities and reproductive health services to gain some measure of authority over their lives.

Secondly, we must intensify societal and parental investment in children to improve child survival and increase primary and secondary school completion rates, especially among girl children. And we must include men in the fertility transition. A question was

raised about this earlier. Men have not been subject to population policy, and they need to be. We must explicitly define and support men's responsibilities with regard to sexual behavior, fertility, increased participation in the care and economic support of children. Part of the population conundrum is the dependency burden. If an appreciable amount of adult income is not available to support children, you have a much more extreme dependency burden, and this is where the male role comes in I think most importantly.

Now a few comments on each of the three areas. Increasing women's access to and control of valued resources. We have heard this morning I think a good description of why it is important to empower women economically and give them steady livelihoods under their control. I call attention especially to needs of women 15 to 24. Between the ages of 15 to 24 most women will have their first sexual experience, whether it is voluntary or not, will have their first pregnancy, whether planned or not, will in some order they will marry, but there is not much scope for many women in making those partnership arrangements.

This is the pivotal time in their lives. Many will have several children by the time they are 24. Our social and economic planning must support young women so that they are not pressured by partners or family into early sexual relations or unchosen oppressive marriages and children they are not ready for. We speak of family planning but women of this age have very little that they have control over or can plan.

A recent series of studies in Latin America found that about 20 to over 60 percent of ever-married women with one child had a premarital conception. Among unmarried women, one-half to two-thirds who had a child said the child was unplanned. There is growing evidence of coercion in sexual relations both inside and outside of marriage and we are finding high rates abandonment by fathers of children conceived premaritally.

This is not just simply a fertility issue, but it is a long-term poverty issue. An expanded population policy would give attention to the development of social choices and livelihoods for women across the reproductive ages. This means not simply mounting new efforts. We need the innovative small efforts. But we are spending large amounts of money in programs which arguably undermine women's authority, which either award their wages to another member of the family, or which increase the uncompensated demands on their time, or which makes them more reliant on child labor.

All of these factors carry fertility implications. If you are spending 80 percent of an AID investment budget in a given country on agricultural and rural development, it is very important that that 80 percent is spent well and is supportive of a lower demand for children. A lot of that will operate through how women are treated. Any measures which demote women's livelihoods or put them under male control, or increase pressures on their already scarce time and will have long-term fertility implications.

With regard to younger women, I think we need a new initiative called "Take Back Young Lives" in which we think very clearly about how to reach women 15 to 24. They are being extruded from their natal families, they are not yet in another set of families.

They have very few advocates and unless they are armed with education, skill training, participation in community services and a standing on their own there is no way they can delay the onset of sexual activity, make choices to protect themselves from unwanted pregnancy, choose when to have children, delay into their twenties a first birth, increase the space between a first and second birth.

Those are the four factors of population momentum which is fully half of the population growth we are expecting.

The second set of investments we must make are in children. These I think have been spoken about, so I will touch briefly on them. Of the many things we must do for future generations, activities in two areas have the greatest fertility impact—improving child survival and increasing educational levels particularly among girls.

Parents who are uncertain about the survival of their children tend to invest less in each child, a perverse but real effect. They tend to have more children than they need because they fear some will die. No country in the developing world has experienced a sustained fertility reduction under high child mortality conditions, with the possible exception of Bangladesh, where there is some question.

Increasing school attendance and grade completion rates have the effect of raising the cost of children to parents but also preparing children for the emerging economies of their countries. Of all forms of investment which are thought to affect fertility behavior, the education of girls stands out as the most consistent. Much about this has been said here today.

Let me add that educated women use all community services better, regulate their fertility better, want fewer children, and when they have sick children, treat them better, and have fewer child deaths. And they carry forward a different set of expectations for the next generation. They want their daughters and their sons to be educated. They are much less likely to withdraw their daughters from school when economic circumstances get worse.

Overall, primary school education especially for girls, is a crucial element in setting the stage for sustained fertility. Where do men fit in? We must have population policies that think through men's sexual fertility and parenting roles. We must have a complete frame.

If we are assisting women and thinking about their needs in the livelihood sphere, we must think about men in the domestic and child sphere. Whereas men reap a disproportionate benefit from children, women carry a vastly disproportionate share of the penalties and responsibilities.

In simple economic terms, women have different incentives to control their fertility than men do. It is not uncommon for women's time budgets vis-a-vis children to be seven times that of men's is. So they are spending 7 times, sometimes 10 times more personal time on children.

We have evidence that increasing numbers of men are abandoning their economic responsibility to children. We find in many communities around the world between 25 and 40 percent of households—these are households with children—supported by women solely or substantially. What is the result? We have men in many

countries having many, many more children than the national average.

In Mali, for example of women age 40 to 45 the median number of surviving children was 4.3, but the men they were married to had fathered 8.3. In Kenya, married men are fathering nearly 10 children over their reproductive lifetimes, but the women to whom they are currently married report 6 or 7. Much of this excess male fertility takes place over the age of 45. But if you look at the family planning messages and programs, I have yet to see a poster which suggests to older men that they control their fertility. These messages are directed to younger women.

The fertility decline in 19th century Europe was basically male led; at least is my opinion. There were no modern contraceptives save the cost of children. People were expected if they were going to get married to say, I am planning a marriage, and people could raise public objections, this person can't support a wife or children.

There is the expectation that men would be economically responsible for their children, and that was the contraceptive. And all the current arguments about who and who cannot use contraceptives might go back to what the motivations are and what are the exit costs if you fail to use contraception. There are quite different for men than for women. Therefore, I believe a new subject of population policy should be how the costs of children are shared between the State and the family as well as between parents.

There are countries in the world in which children's names do not appear on birth certificates unless the parents are married. Child maintenance procedures are not often specified, and in any case, they are difficult to enforce but they set norms about the social contract between parents and children. In some countries as many as 50 percent of the children may be potentially denied access to their father's economic resources because of the circumstances under which they were conceived, born, or are currently living. Thus, I believe we must use all the normative, judicial, program, and economic measures that are at our disposal to encourage responsibility.

Our programs are creating perverse incentives for men to absent themselves, beginning with a lack of male imagery, and this includes child health programs which only have mother-child imagery. The father-child link is equally important as the mother-child link.

This leads to my final subject, fairness for children. We must affirm a woman's right to bear only the children wants and feels can be supported under her circumstances and the related right of children to be wanted, planned and maintained by both parents. Population policy with this set of values is fervently pro-child and pro-family.

In summary, I carry three messages—bring women, especially adolescent girls and young women, into the social and economic mainstream.

Promote societal and parental investment in children, and affirm children's rights to be wanted and supported by both parents.

Include men as central subjects in population policy.

As for implementation, I have a simple proposal and it may be uninformed, because I know there has been a great deal of discus-

sion about the reorganization that is being planned. There is to be, I understand, a Bureau of Global Programs within USAID and within that an Office of Program and Policy Coordination.

Whether there or elsewhere, I believe we should invest at highest levels of State and USAID oversight for our whole development assistance portfolio in a few demographically significant countries, and look at the meaning and population impacts of our entire range of investments; not just the 3 percent, but the other 97 percent.

In some cases we can make alignments within sectors; for example investments in primary school education have a much higher fertility impact and also spread income more equitably than investments in post-secondary school education.

I would also suggest that where the gender issues are placed within the reorganized agencies should be a matter of tremendous interest for anyone interested in population. If those interests are marginalized, many of the social and economic measures which could have great effects for women and also for population will not have advocates and they will need strong advocates and advocates with a budget.

Let me sum up. I believe that this is a win-win situation. If we integrate a population perspective across sectors we can simultaneously foster productivity among the poorest and most vulnerable members of our society. We can enhance parent to child investments, we can promote social justice and we can accelerate voluntary fertility decline.

Thank you.

Chairman HAMILTON. Thank you very much.

[The prepared statement and illustrations of Ms. Bruce appear in the appendix.]

Chairman HAMILTON. Ms. Peggy Curlin is the President of The Centre for Development and Population Activities.

STATEMENT OF PEGGY CURLIN, PRESIDENT, THE CENTRE FOR DEVELOPMENT AND POPULATION ACTIVITIES

Ms. CURLIN. Thank you, Mr. Chairman, and thanks to the committee.

My organization, the Centre for Development and Population Activities, is an international women-focused organization with a network of over 900 partner organizations in Africa, Asia, Eastern Europe, the Middle East and Latin America. Since 1975, we have worked with women leaders and women's organizations who have an enormous outreach in the 105 countries around the world.

These women leaders are convinced that family planning saves women's lives and enables women to expand their participation in the economic, political and social life of their communities and nations.

The term "family planning" describes the conscious effort to determine the number and spacing of births. The use of safe and appropriate family planning methods is critical to the health, well-being, and autonomy of women. It also promotes the health and welfare of children and the well-being of families.

By enhancing the potential of individuals, family planning also contributes to achieving developmental goals: the advancement of

women, the stabilization of population growth, preservation of the environment, democratic processes leading to an improved quality of life, and sustainable development.

For women in developing countries, family planning is a matter of life or death. Of the more than 500,000 deaths each year due to pregnancy and child birth, fully 99 percent occur in developing countries. Complications from illegal abortions compound a grim scenario of women having too many children too soon, too late, and too closely spaced.

Recent statistics from Eastern Europe and the former Soviet Union reaffirm that pain, suffering, and in many cases death are an outcome of the lack of safe and available contraception. Sadly, the situation may be even more dire than these statistics indicate. According to the World Health Organization, maternal death is probably twice the estimated figures.

Thanks to U.S. foreign assistance and to the leadership of such agencies as USAID and the United Nations Population Fund, family planning services are more widely available today than ever before, saving lives and enabling many women and men to act on their desire for smaller, healthier families.

The use of modern contraception in developing countries has grown from less than 10 percent of married couples in the 1960's to 51 percent today. Approximately 375 million married women in the developing world are using modern contraception, and great strides have been made in improving the health of women and children.

However, the success of family planning efforts to date should not mask the fact that a vast need for contraception remains in the developing world. Surveys supported by AID indicate that one woman in every five wants to use family planning but has no realistic way to obtain the information and services she needs.

If all of these 120 million women were able to have only the number of children they want, there would be one-quarter fewer births in Africa and one-third fewer births in Asia and Latin America. Reaching these women who have expressed their desire for limiting and spacing their fertility should be the first priority of future family planning programs.

Traditional family planning programs were built on Western models of clinic-based health care that rely on patients coming to clinics for services. We must now use our understanding of the social and cultural constraints in developing countries to build a second generation of family planning programs that will reach 120 million women without services.

For example, a Bangladeshi woman's mobility is limited to her courtyard by centuries of tradition and cultural practice. An African village woman spends 10 hours a day tilling her fields to grow the crops which account for the 80 percent of all food production on the continent.

A Latin American woman leaves her urban slum each morning to travel miles to the more affluent suburbs to care for other people's children.

A young woman in India is married with the sole expectation that she will produce sons.

A young teenage girl in Africa is seen as a desirable partner for an older, sexually experienced man because she will not give him AIDS.

The second generation of family planning programs must be community based, community operated, and nonbureaucratic. They must move beyond the clinic to the workplace, the home, the school and the marketplace, wherever people can be reached. They may have to address developmental needs such as female literacy in the process of providing women with fertility choices.

The leaders of these programs will come from the community itself—women's groups, nongovernmental organizations, church groups, and community development agencies. These leaders are trusted and readily accepted by those they serve.

Empowerment will be a hallmark of the second generation of family planning programs. The community-based approach will empower all those who are involved in it as service providers and users of service. Women who use family planning will develop decisionmaking and communication skills, increase their self-esteem and autonomy, and increase their influence in the family and the community.

This committee and policymakers need to be aware that it will take creativity and new paradigms to reach the 120 million unserved women and bring about population stabilization. I would like to make five recommendations for the second generation of family planning.

First, we must take more seriously individuals' rights to freely and responsibly plan their families without use of coercion or incentives other than their own well-being. There is no single best method of contraception for women over a lifetime of planning their fertility.

Second, family planning is a development as well as a health issue and must be placed within a broader socioeconomic context. Nongovernmental organizations that work within the context of income-generation, education, and skills training for women are ideal family planning service providers.

Third, nonclinical professionals, especially women, must be trained and equipped to be on the frontline of family planning.

Fourth, nongovernmental organizations must be partners with government in providing information and services. Governments that do not actively involve and support nongovernmental organizations will not succeed in reaching their development.

Last, family planning must be available to young women before marriage and childbearing, even if they delay using it. Our moral dilemma about family planning information and services contributing to promiscuity must be put to rest. Studies show that availability of family planning does not contribute to promiscuity and logic argues for delaying the responsibilities of parenthood by choice and not by chance.

Recently a group of 31 women leaders of family planning and development programs represented CEDPA at the Preparatory Committee meeting for the International Conference on Population and Development. This group alone reaches 27 million women in 17 developing countries. Their focus in advocating family planning was

succinctly stated in just three words: choice, access and participation.

They believe that women, no matter how restricted, have the right to make choices about contraception based on complete and honest information; that they must have realistic access to family planning services regardless of their age, marital status and socio-economic condition; and that they must be active and not passive participants in the programs that are meant to serve them.

Women leaders who understand what women want and need are vital to the second generation of family planning. Your support for them and for innovative family planning programs is essential to 120 million waiting women. You can do nothing better for their health and their well-being.

In conclusion, the impact of family planning was summed up strikingly in the 1991 UNICEF report on the State of World's Children. "The responsible planning of births is one of the most effective and least expensive ways of improving the quality of life on Earth, both now and in the future, and one of the greatest mistakes of our time is the failure to realize this potential."

Thank you.

PANEL II DISCUSSION

Mr. SAWYER [presiding]. Thank you very much.

The chairman had to step out to make a phone call. He will be back. I understand that we are working toward a vote that will take place at 12:10, so I will just ask one question and then ask others to join.

I am particularly interested in the way in which the trends over which we have little control can become assets in addressing those larger trends over which we are trying to exercise control. Clearly one of the things that is occurring in the developing world as fast as any other demographic phenomenon is the growth of urban populations.

It places great demands on those settings, settings which are unprepared to address infrastructure needs we talked about, such as providing clean water or waste management or any of the other fundamental needs of life.

It is also probably as politically destabilizing a setting as I can imagine for large competing populations to come together. Still, it represents an opportunity for the kind of education that every one of you has talked about in a global environment and a global culture.

Can you talk for a moment about the benefits and the potential dangers in that kind of setting, as we see perhaps the most intensive competition for limited resources among very diverse populations coming together with the opportunity to bring the resources we need to manage that problem?

Ms. TORREY. I will talk about the opportunities and I know Judith can talk about the problems.

What you are describing is absolutely right in the urban areas, that you have this enormous potential of being able to get the services easily so they have more access to family planning and education, adult education through communication itself. What we have seen is that people who move into urban areas actually adopt

the demographic characteristics of the people who live there. They have much lower fertility rates, lower infant mortality rates.

If we took advantage of this trend, we might be able to promote some of these advantages. There are a number of downsides which Judith and I have talked about.

Ms. BRUCE. It is a fascinating subject. I don't think it has been looked at very systematically. When communities move, when people move into the city, sometimes they move as a community and that is probably good, so you have a more densely packed community. But sometimes there is a great deal of distrust and fragmentation so that the sharing of information, experience and support breaks down.

The physical dangers in many urban environments are a tremendous impediment to receiving services. Women may know about them, but one in three has had a violent crime in the last year. They don't want to leave their kids at home because the kids might have a problem at home while they are away. They don't want to take their kids with them because transportation is difficult. So physical security in urban environments will have something to do with access to services, even if information is being shared.

I also think what may happen to family patterns and the reproductive patterns bears attention because you begin to get higher rates of familial disruption. You have transportation patterns, men leaving early in the morning to go to very distant places to work, women staying in another area. Though, living in the same house, but it is as if the men are migrants, inhabiting different worlds both with insufficient wages, and the expenditure patterns of the male may not line up with what the female thinks should happen.

So though there may be the resources that will promote increased investment in the next generation, you may not have male-female accord on how resources should be spent and males' and females' income portfolios can take really different directions in that setting.

What we see in some of the larger cities in the world is tremendous numbers of children who have no sponsors. They may have parents around, but they have been extruded. I don't think you see this to such a large extent in rural areas; however pressed. The support systems are there.

The chance is that you will have more and more young girls 8 and 9 years old selling flowers and themselves later, and kids dumped on the street also increases. It is a mix.

Ms. CURLIN. There are some striking success stories of providing services in those urban settings. In Bangladesh, Concerned Women for Family Planning has provided services to over a million and a half women in urban slums, going house to house and providing that kind of community-based education and support.

There are also innovative support mechanisms such as community kitchens in the barrios in Lima where also education and family planning services are a feature of women's efforts to cope with a horrible situation.

I think it argues for getting within the community to organize and mobilize, that that community can begin to help itself.

Mr. SAWYER. I realize that the numbers are not nearly what we are talking about here, but I am also very much interested in the

way in which population movements and dislocations by themselves provoke many of the same kinds of problems on a much more intensive scale because they happen so rapidly.

Do we have any clear sense of the way in which population growth and the tensions that result provoke migration patterns and the kind of explosion in refugeeism that we are seeing in the world today?

Ms. TORREY. The research is really mixed on that. It is hard to disaggregate how much of the refugee movements is due to population growth versus wars, dislocations, floods and whatever, and if there had not been floods and wars even with high population growth, you might have not have had the same kind of rate.

Mr. SAWYER. When I talk about population I am not just talking about growth. I am talking about cultural competition, about economic competition. Growth is one element.

Ms. TORREY. I know that the microresearch on refugee flows shows that the majority of people who are moving are moving to improve their lives, and they are moving from places in rural areas where they simply don't have the opportunities. This is why the urban slum looks good to them, why they would move there. Part of the reason that they don't have the opportunities in the rural areas is because the population growth has not been accommodated and hasn't been able to take off in terms of the economic development itself. It is a hard question.

Ms. BRUCE. I have nothing to add except to say that the numbers of people that are environmental refugees or civil disruption refugees are increasing and in some cases 75 to 90 percent of the adults will be women with dependent children. We have a opportunity and a responsibility for those women in that circumstance—I saw one estimate of 30 million waiting to be settled and another of 60 million—to think about their integrated economic and social needs. Many of those families will not be back together. Those women have to have livelihoods, they have to have health services. There is a tremendous problem of sexual violence against them.

One of my colleagues was head of the largest refugee camp in the Thai-Cambodian border. He said half the women there had been raped. Our inability to support those women is dramatic, and their lives have been changed forever. They are not going back to where they came from.

Ms. CURLIN. I think there is something we can do immediately and effectively, and that is to consider contraceptives an essential drug, to be made readily available. For example, we know that Russian women do not have access to modern contraception and therefore are forced to use abortion as a standard method of preventing birth. Certainly logic would indicate that they are in dire circumstances which are compounded by pregnancy and birth.

Mr. SAWYER. Thank you, Mr. Chairman.

Chairman HAMILTON [presiding]. Mrs. Meyers.

Mrs. MEYERS. Thank you, Mr. Chairman.

You have all said that education and bringing about regard for women's human rights are essential in informing them about the importance of population control and getting them the information that they need. Now, the hard question I think is, how do we get these women educated? How do we bring about regard for human

rights? How can we best use our influence as a country in a noncoercive way to accomplish education for women and regard for human rights in countries where it is considered against their religion or against their culture to provide this?

I think all of us have regard for religion and culture, but if religion and culture says that women can't drive or if it says that the women for instance in Bangladesh can't leave their own courtyards or if one of the others says that they have absolutely no control over their fertility and it is a religion or a culture that says this, how can we bring it about? What can the United States do in a noncoercive way without seeming to be going against that country's religion or interfering in their culture?

I think we know that it is religion and regard for that woman that is going to help with the population problems in the world. When we have human rights problems in South Africa, this country enacts sanctions. When a woman can't leave her courtyard in Bangladesh, we do nothing, because that is just culture. How can we get beyond that step?

Ms. CURLIN. I would suggest that it is a very hard step to take and that overturning societal and cultural norms which do not promote women's equal place in the world flies in the face of lots of conventional wisdom. I think that it is essential that we identify women within that culture who may have had those kinds of insights and come to grips with some of the restrictions of their own societies and begin to support them and groups of women within those societies who slowly are working toward changing those societies for women.

I think you are exactly right. We cannot impose our own method of working with women on women in developing countries. However, the yearning of women for equality is there in every single society and the ability to work toward that equality is there within organized women's groups.

I would like to see us through the family planning and population programs begin coordinating our work with their work so that it is synergistic, so that by providing contraception we are also working with those groups providing programs that address the status of women and that uplift the status of women. It really costs no more to work on those issues enhancing the status of women than it does to work on providing good high quality contraception.

I think that this offers a wonderful opportunity to work hand in hand in a synergistic way on the status of women and providing good contraceptive services.

Ms. BRUCE. May I make a comment also on this?

First of all, the area in which I worked for most of my life is the Middle East. And one finds in all societies a great deal of heterogeneity.

Most of the countries of the world have a stated goal of educating their girl children. The problem is the kind of resources devoted toward it. Pakistan spends about 2.6 percent of its national budget on education, and Bangladesh spends 10 percent. And they are in a different place with regard to a number of—the problems.

There are some improvements in Bangladesh we haven't seen in Pakistan. In figuring out why, for instance, girls don't go to school. You often have a very high proportion of girls who start school but

who don't finish school. And when you know why they don't finish school or complete a certain grade you find out what can be done to move them the next step. Typically, they have to go farther than their families are comfortable to get to a school, or there are no female teachers or there are not adequate supplies or the parents have to pay for supplies for school, and they will expend for the boys and not for the girls.

There is a large program now in Bangladesh which is working on more schools so they are an easier access, training female teachers and, in effect, providing book and uniform scholarships for girls about the fourth grade on when you start seeing more drop out, and it is beginning to have important effects. And my understanding of it is supported by a consortium of donors.

USAID is not part of that. We have a program there—and if I am misinformed on this, someone should correct me. But here is an example—they have a stated national priority. They have identified problems. They are seeking investments in the educational sector, especially for females, and we have to participate. In some cases, we have to, I think, try to lead the way.

Mrs. MEYERS. Thank you, Mr. Chairman.

Chairman HAMILTON. Mr. Smith.

Mr. SMITH. Thank you very much, Mr. Chairman, and I want to welcome our panelists to the committee this morning or afternoon. And just let me say just a word or two because I know that we are nearing the end of this hearing.

I have been very concerned, frankly, over our—with this fixation with keeping the number of children down that we perhaps—and for some it is inadvertent, others by design—embrace a number of things that otherwise would be considered intolerable, especially when we unleash a sense of panic among nations that lead governments, particularly those that have authoritarian or dictatorships, to take very draconian measures against their populations.

I think nowhere is this sense of population control more egregious as a human rights abuse than in the Peoples Republic of China where not only are abortions forced and there have been well in excess of 100 million abortions in that country since the one-child-per-couple policy was enacted, but there is also, as you well know, forced IUD insertion, forced sterilization and all kinds of forced measures taken against the population, not only wounding and damaging and at times killing women and children but certainly damaging them psychologically, emotionally and mentally for the rest of their lives. And there have been a spate of stories, including two recently in the *New York Times*, that give grave testimony to the impact that is having in the Peoples Republic of China.

I have been very concerned, Mr. Chairman, that the Clinton administration in its first months in office have retreated. There was a very principled stand that over time, in my view, would yield fruit in saying that there are some things that are nonnegotiable, and coercion in population control is nonnegotiable. It is a violation of human rights comparable to any other violation.

The other tenet of the previous administrations dealt with abortion not being used as a method of birth control, as a means of population control in those programs, believing that contraception pre-

vents—and that is one issue. But abortion takes the life of an unborn child and is a separate and distinct issue.

Regrettably, the administration retreated on the Mexico City policy as well as on its very principled stand in, as I say, the Reagan-Bush years on saying that money going to the United Nations' Population Fund or any other organization that comanaged or supports the China program would no longer go to those organizations.

I was heartened recently by a statement by Mr. Wirth at the United Nations when I he stated, and I quote, a key question for the international community to consider is how government should be held accountable for coercive activities.

And I was wondering, since, unfortunately, we are going backwards in this administration, but, hopefully, they will reverse course, what you think we ought to be doing with the very real and pervasive problems like we have in China, like we have in other countries, including in Vietnam where the government steps in and tells women when and if they are going to have a child. And if their child, like in China, is not part of an approved quota, that child is aborted, very often at the very later stages of pregnancy, sometimes at the moment of birth.

What should we be doing with those governments? I happen to believe we need to speak out boldly. There needs to be a unified front, no matter how one feels about population control as an abstract or as a policy. Coercion—and I would also add abortion as a method of population control—ought to be seen as violations of human rights. If the panel could speak to that, I would appreciate it.

Ms. TORREY. I think that you would get no argument. I think everybody feels that way, especially women feel that way in terms of the coercive effect.

One of the interesting things that has come out recently is showing that, in fact—and maybe one of the things we should be doing with these kinds of government is showing them that if they simply met the unmet need of the women—these are the women who are saying that they want no more children or they want to delay their children—they could, in fact, in almost every case meet their population goals simply by filling the contraceptive needs of women that are not being fulfilled now. And trying to get these countries to realize that there is an alternative to coercion that brings them back within the international community itself.

Ms. BRUCE. I would add to that and also in my remarks earlier that, by focusing solely on the family planning aspect of population policy—there is a long way to go in providing services to meet the unmet need—but there is another margin to go to create the circumstances for people to want to have fewer children. I would say we work with governments both to encourage them to meet the unmet need through higher quality services but also to think of the supportive, and I think unarguably, fair social and economic measures which create a situation in which an individual or couple say "I want to have fewer children because these are the children I can invest in properly and support."

So we need to have that other part of the conversation with governments which currently I don't believe we are having.

Mr. SMITH. Ms. Curlin.

Ms. CURLIN. I think that a lot of governments need to be shown that what they are doing or what they believe they are doing is not effective in terms of meeting the kinds of goals they have.

For example, India suffered the overturn of one government based on coercive or incentive policies, which targeted women and men for one particular kind of family planning. This was not an effective way to reach the targets that they had in mind and, as a matter of fact, destabilized the government to the point where the government of Indira Gandhi was toppled.

India has learned by that mistake. They have removed all targets for family planning. And particularly in a new program in the State of Uttar Pradesh, they are developing a more community approach to family planning by developing their nongovernmental sector, by giving more free choice, by being more democratic in the way that they are going about family planning.

And I think that they would agree that the development model of family planning may be somewhat slower, perhaps, than the target model of family planning, but, in the end, it is that model that is going to succeed in meeting those goals.

Mr. SMITH. If I could just followup very briefly, Mr. Chairman.

If you could address the Government of China where, again, women in huge numbers—by the millions—are denied that opportunity to have a child, sometimes even their first, if it is out of the quota that has been assigned to their local area, what would that message be to China?

Ms. CURLIN. You are making a big mistake.

Ms. TORREY. That is right.

Mr. SMITH. OK. Thank you.

Chairman HAMILTON. Looks like there is a consensus on that.

Any further questions?

Mrs. MEYERS. No, Mr. Chairman.

Chairman HAMILTON. Well, it has been an excellent panel. Thank you very much.

Ms. CURLIN. Thank you.

Chairman HAMILTON. The committee stands adjourned.

[Whereupon, at 12:19 p.m., the committee was adjourned.]

APPENDIX

PREPARED STATEMENT OF THE HONORABLE JAN MEYERS

Mr. Chairman, I am especially pleased that you are holding this hearing. World population growth is an issue that Congress must recognize as one that causes much misery and conflict in the world; and is therefore an issue that is not remote, but is of vital interest to the United States.

I would like to commend our colleagues Tony Beilenson and Connie Morella for their leadership in organizing the Congressional Caucus on Population and Development. They have done yeoman service in promoting this issue.

Overpopulation—a population too large for the available resources—is both a symptom and a cause of poverty. Population densities that are perfectly sustainable in a rich society are grossly overpopulated in a poor one. But more important is the poverty and misery that excessive population cause. When there are too many people, natural resources are consumed quicker than they can be renewed. Wealth cannot be invested because it must be used to feed too many mouths.

There is also the direct human cost of an excessively high birth rate. When women have so many children, especially when the woman's health is not good, it weakens them and makes them vulnerable to sickness, and the children are less healthy as well. This is in addition to the health risks caused by the degradation of the environment caused by overpopulation.

This is why I strongly support making population policy a key priority of our foreign assistance programs. No amount of economic development assistance that we can provide will be any help if population growth continues at its current rate. Our aid must be directly focussed at helping countries reduce their high population growth so that development aid can actually improve the standard of living of the recipients.

Mr. Chairman, I look forward to our witnesses' testimony, and am sure that our colleagues will find it enlightening.

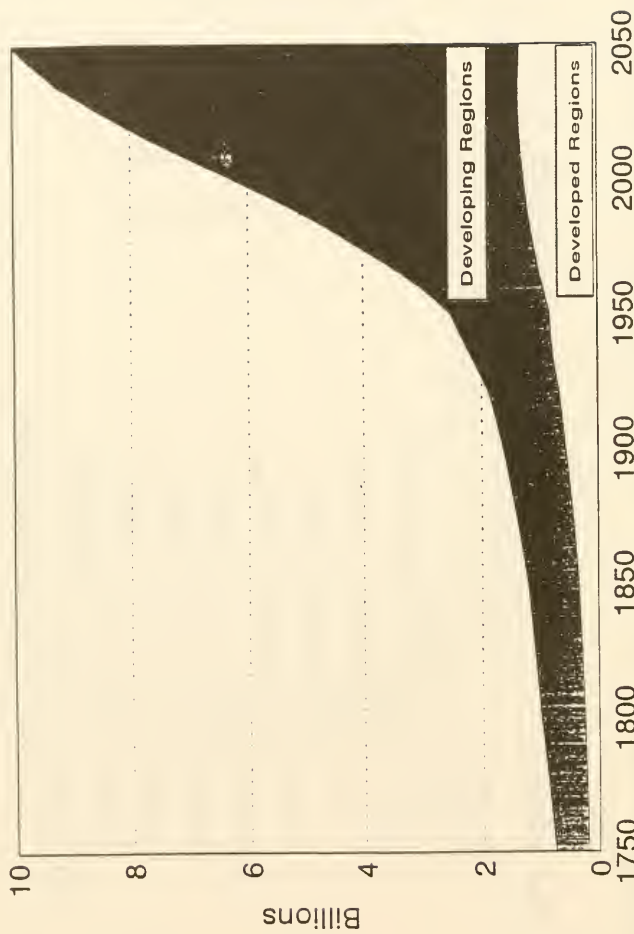
**MATERIALS TO ACCOMPANY
THE TESTIMONY OF
BARBARA BOYLE TORREY
BEFORE THE
COMMITTEE ON FOREIGN AFFAIRS
U.S. HOUSE OF REPRESENTATIVES**

WORLD POPULATION: NUMBER OF YEARS TO ADD EACH BILLION



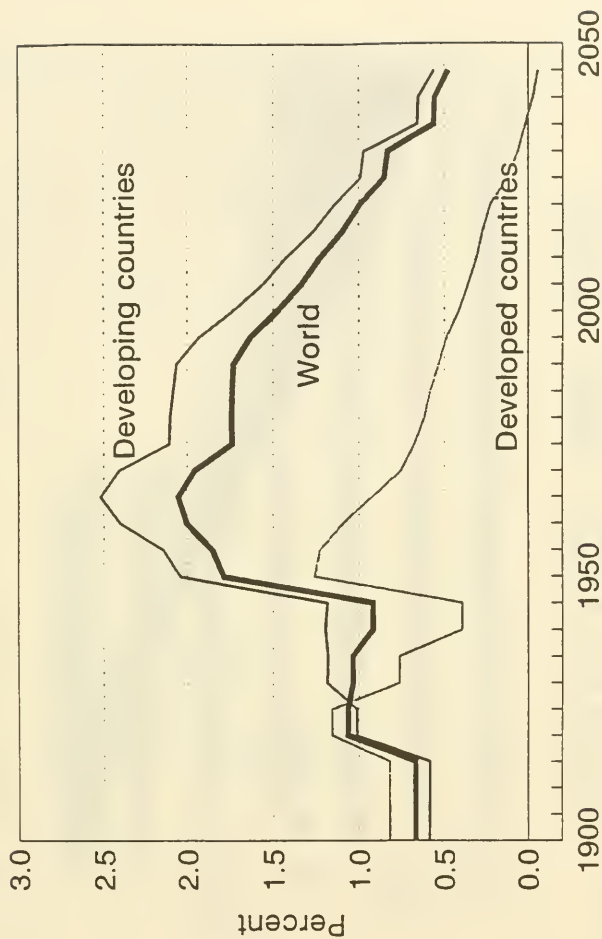
PRB estimates based on United Nations publications

WORLD POPULATION: PAST AND FUTURE



Based on United Nations estimates and projections

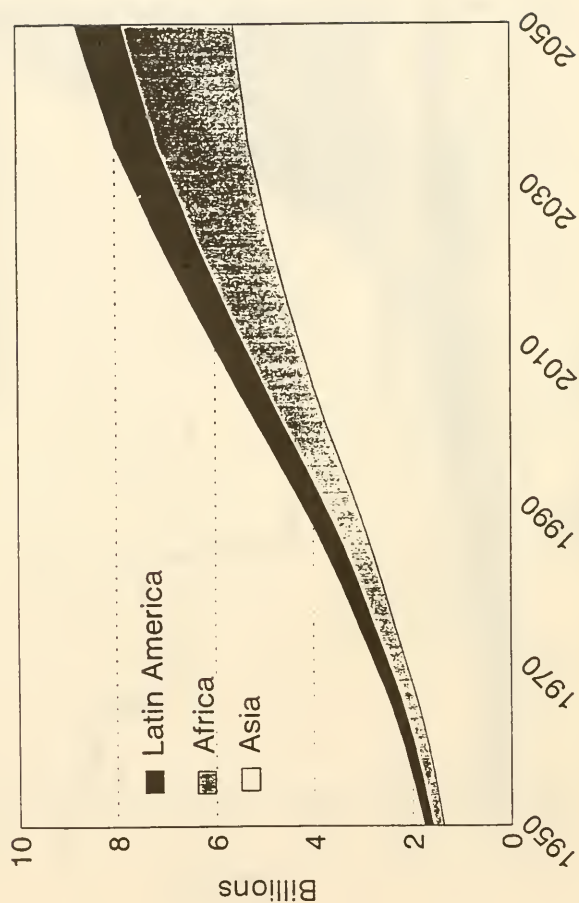
AVERAGE ANNUAL POPULATION GROWTH RATE 1900 - 2050



PRB estimates prior to 1950, UN projections thereafter

PRB

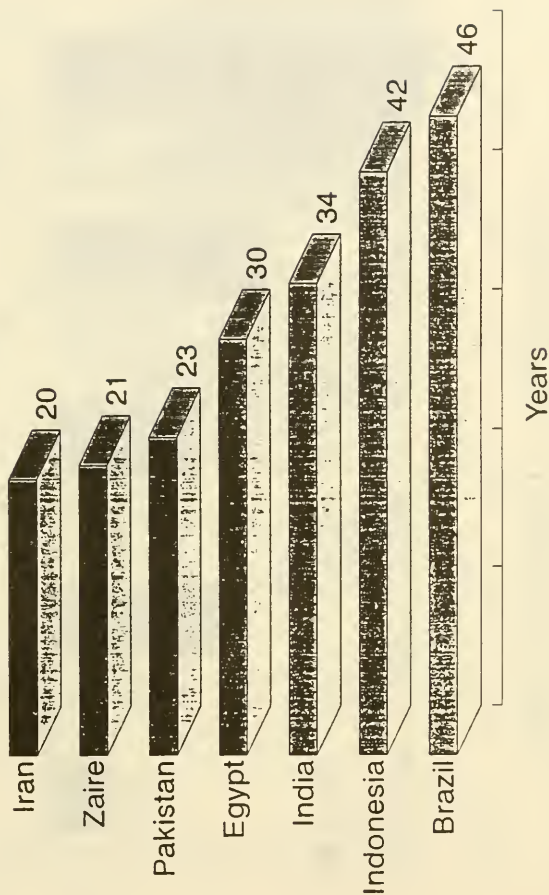
AFRICA, ASIA AND LATIN AMERICA'S POPULATION: 1950 - 2050



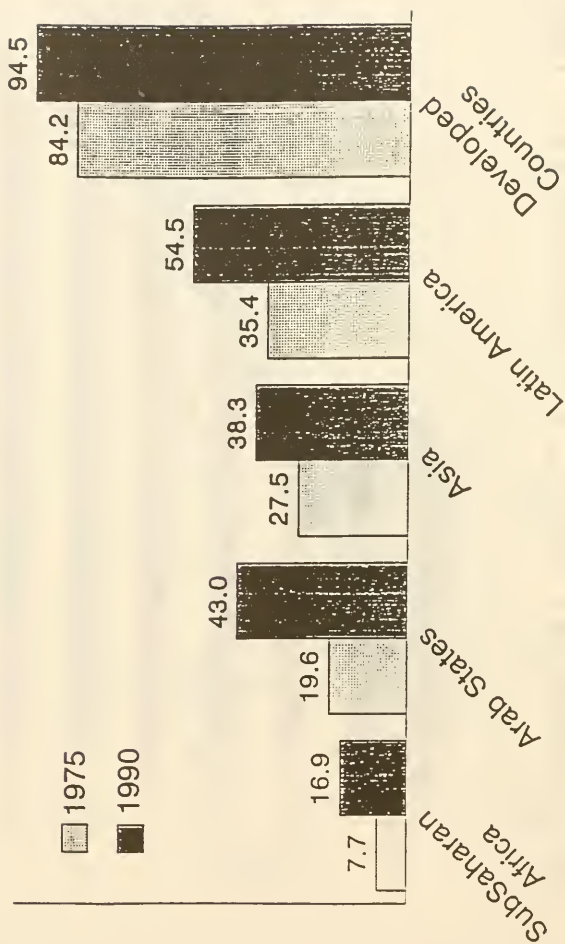
based on United Nations estimates and projections

PRB

POPULATION "DOUBLING TIME" AT CURRENT RATE OF GROWTH: 1993

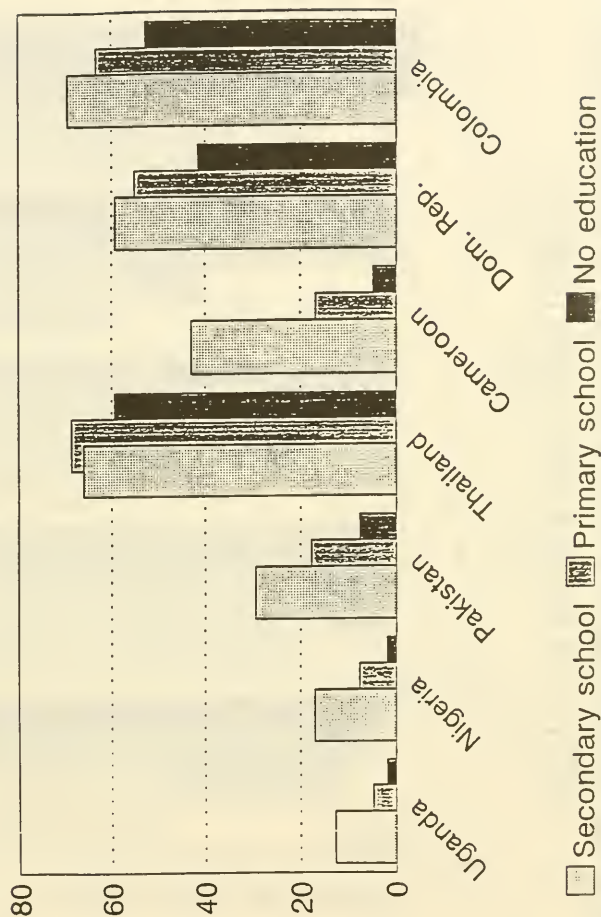


PERCENT OF FEMALES ENROLLED IN SECONDARY SCHOOL



CONTRACEPTIVE PREVALENCE RATES BY LEVEL OF EDUCATION

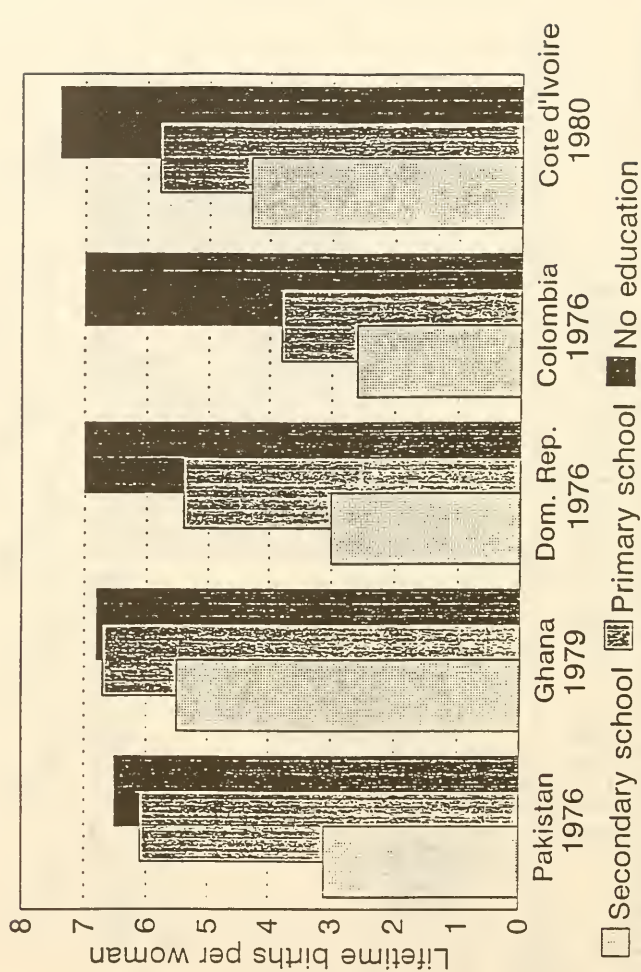
(Percent of married women age 15-49 using contraception)



Demographic and Health Surveys

PRB

TOTAL FERTILITY RATES BY LEVEL OF EDUCATION OF MOTHER



World Fertility Survey

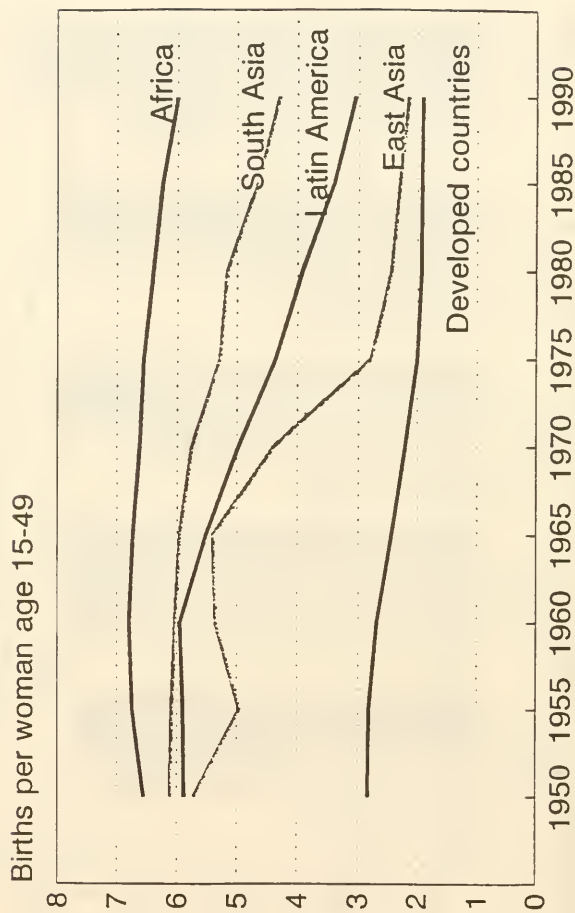
PRB

TRENDS IN CONTRACEPTIVE PREVALENCE IN DEVELOPING COUNTRIES: 1960-1990



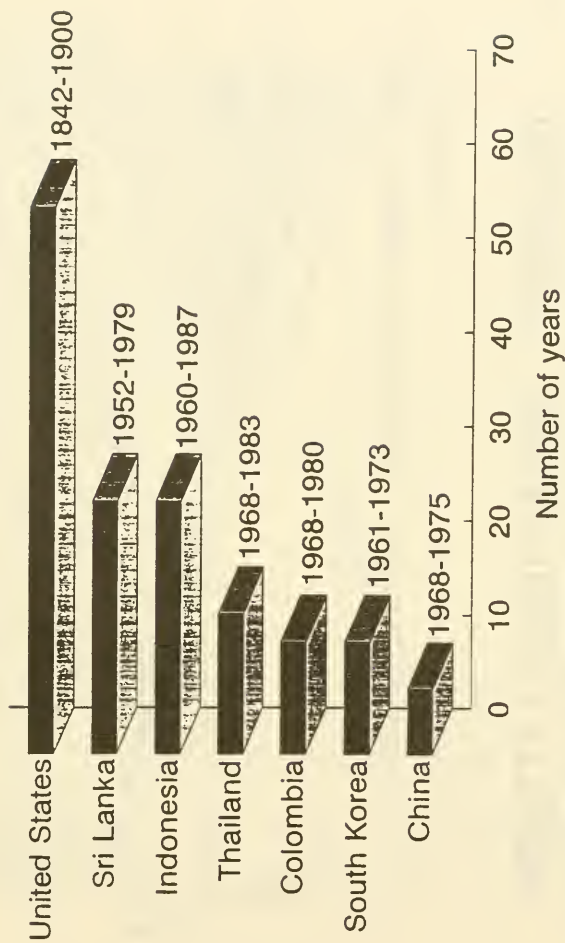
United Nations, *Levels and Trends of Contraceptive Use As Assessed in 1988*, and PRB estimates.

WORLD FERTILITY PATTERNS 1950 - 1990

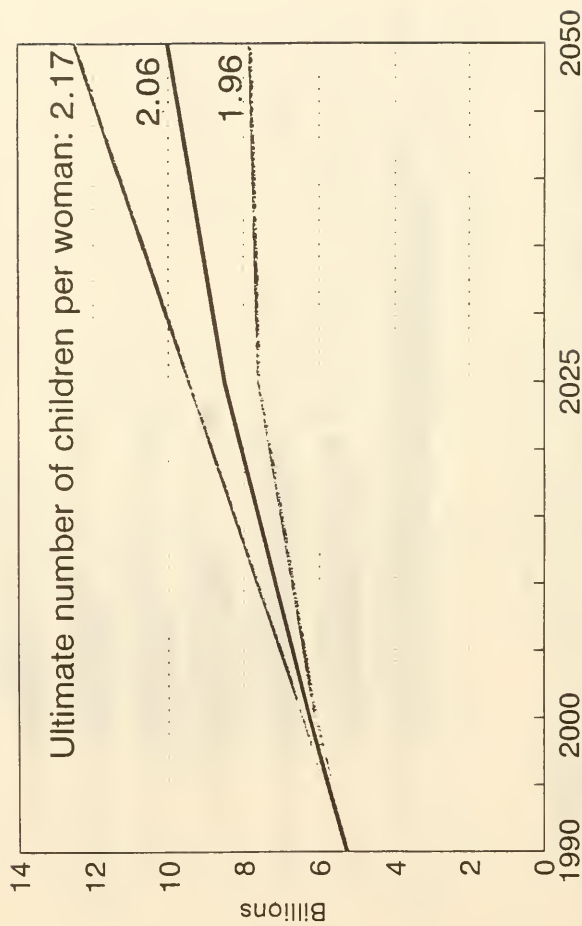


NUMBER OF YEARS TAKEN TO REDUCE FERTILITY FROM 6.0 TO 3.5 BIRTHS PER WOMAN

Selected Countries



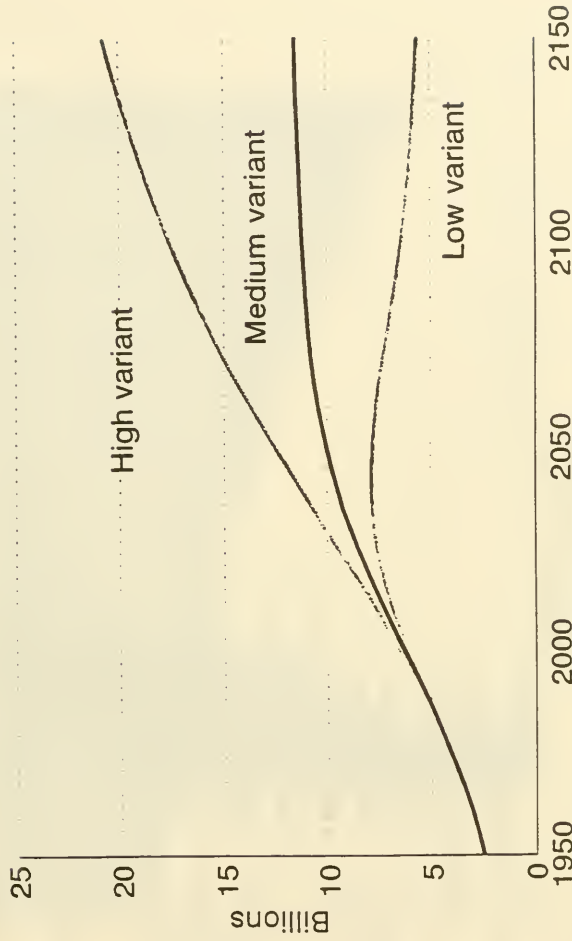
LONG-RANGE PROJECTIONS OF WORLD POPULATION : 1990-2050



United Nations, *Long-range World Population Projections, 1950-2150*

PRB

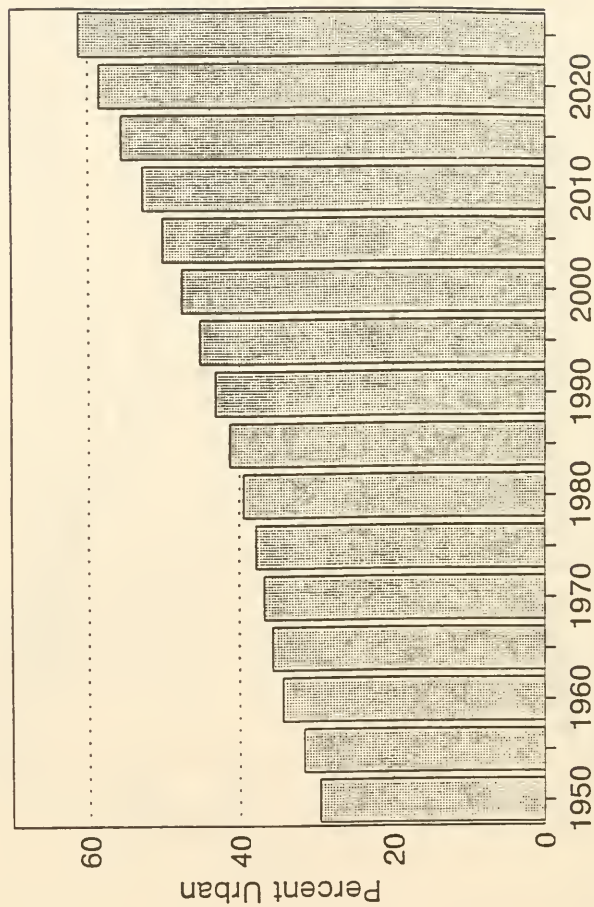
World Population Projections: Three Possible Scenarios



United Nations, Long-range World Population Projections 1950-2150

PRR

AN INCREASINGLY URBANIZED WORLD 1950-2025

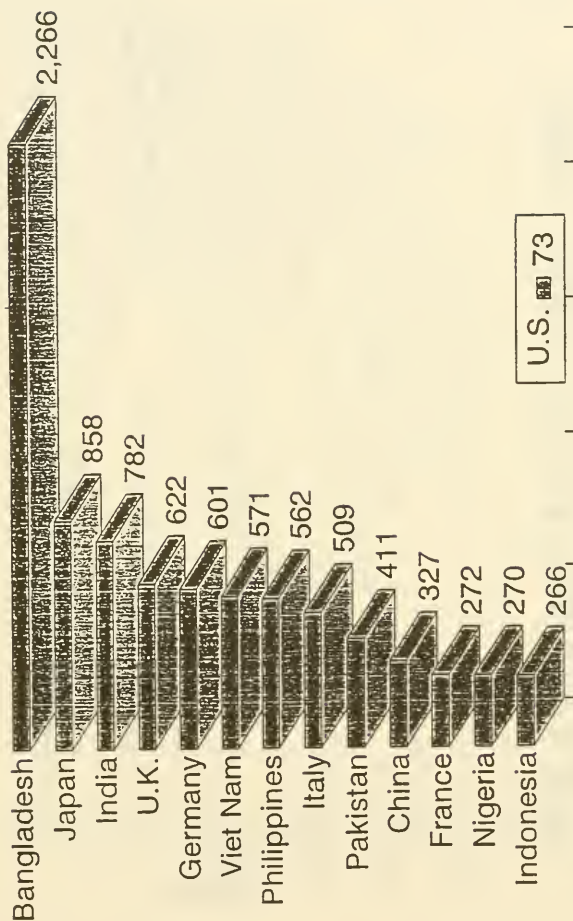


U.N. Population Division

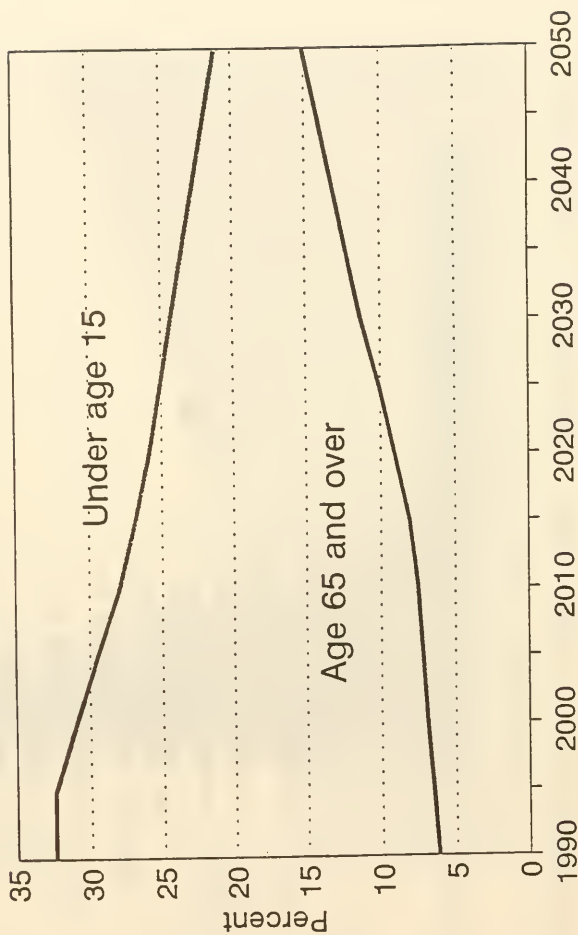


LARGE AND DENSE

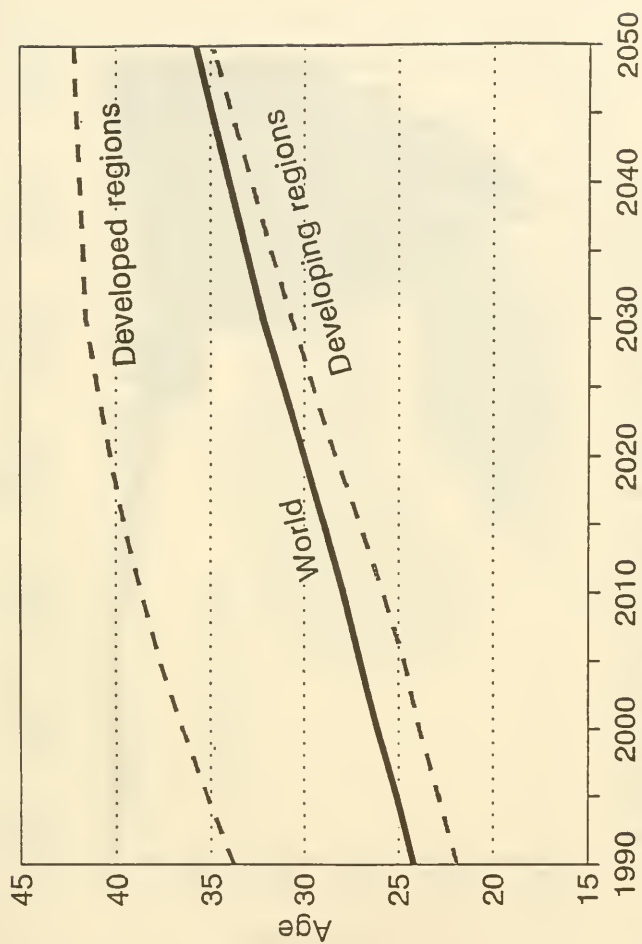
(Population of over 50 million and density over 250 per sq.miles)



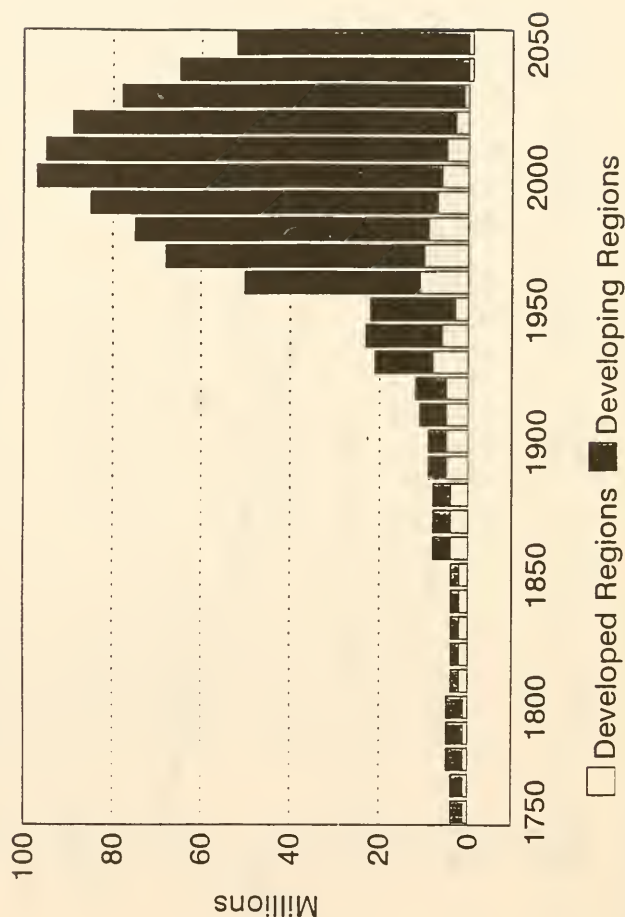
POPULATION UNDER AGE 15 AND AGE 65 AND OVER: 1990 - 2050



MEDIAN AGE. 1990-2050

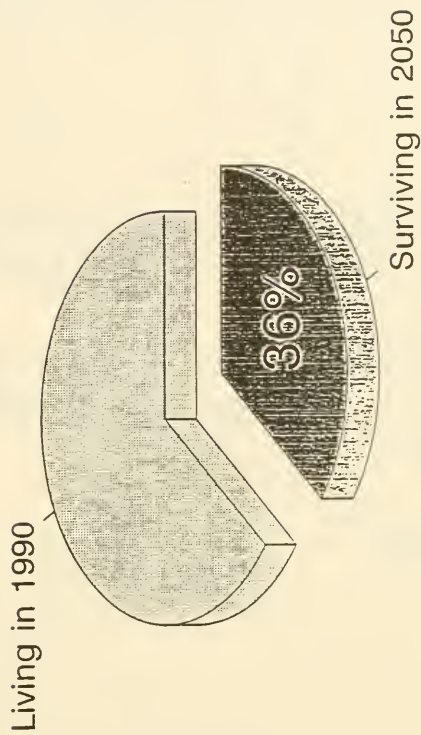


ANNUAL INCREASE IN WORLD POPULATION PER DECADE



Based on United Nations estimates and projections

PROPORTION OF WORLD POPULATION IN 1990 THAT WILL STILL BE ALIVE IN 2050



Population Reference Bureau projections

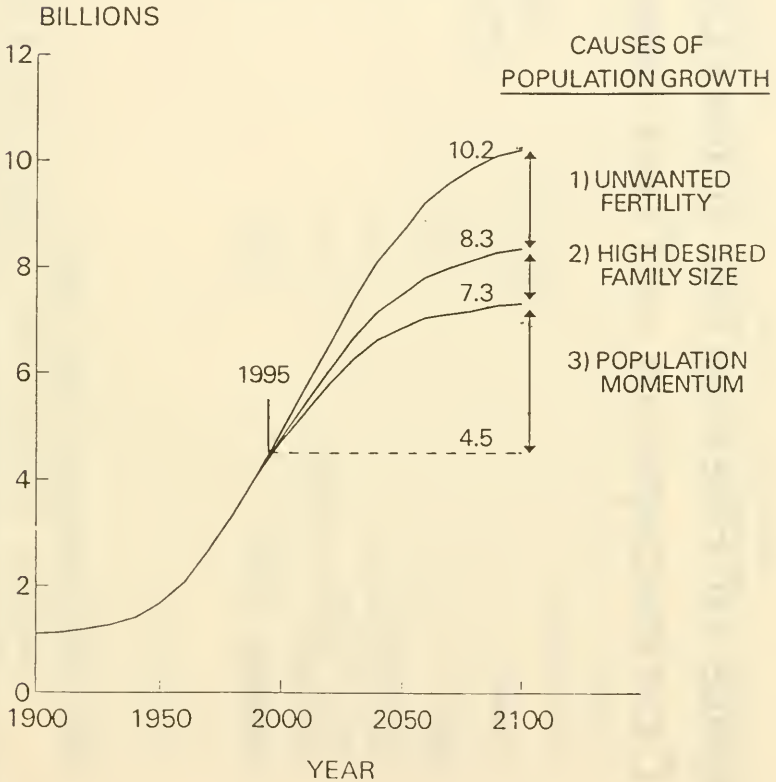
PRB

**ILLUSTRATIVE MATERIAL FOR
TESTIMONY OF JUDITH BRUCE**

**House Foreign Affairs Committee
September 22, 1993**

FIGURE 1

ALTERNATIVE PROJECTIONS OF THE POPULATION SIZE
OF DEVELOPING WORLD, 1995-2100, AND CAUSES OF
POPULATION GROWTH



SOURCE: BONGAARTS, JOHN. "POPULATION POLICY OPTIONS IN THE DEVELOPING WORLD." FORTHCOMING.

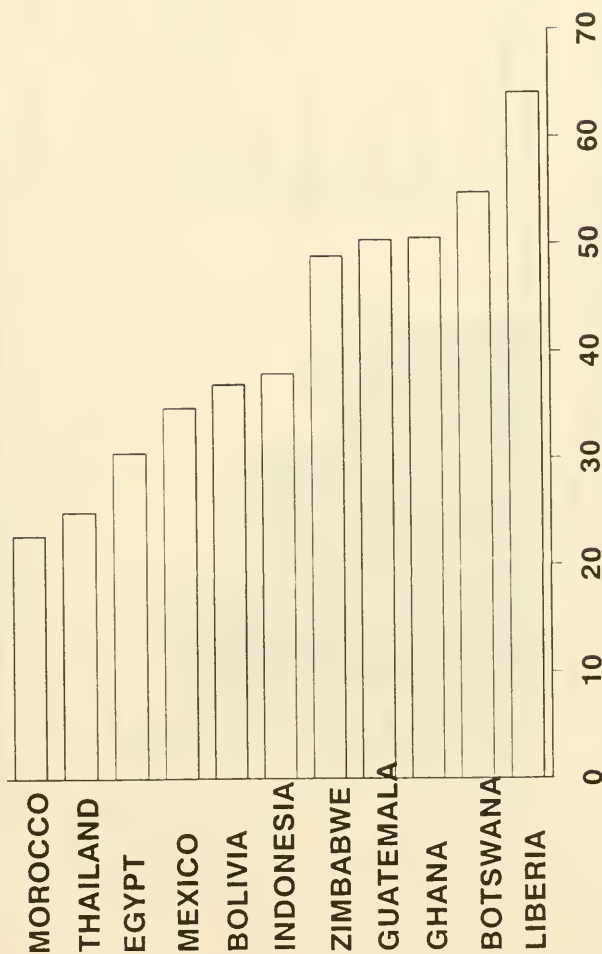
Rate of Premarital Intercourse and Contraception at First Intercourse

Country	Age (%) 20-24	% Reporting Contraceptive Use
Haiti	63.9	9.9*
Quito, Ecuador	33.8	8.4
Rio de Janeiro, Brazil	61.2	31.6
Santiago, Chile	56.5	20.3

* First coitus, regardless of marital status

FIGURE 3

% OF WOMEN AGED 20-24 WHO HAD FIRST BIRTH BY AGE 20 (LATE 1980s)



SOURCE: FRED ARNOLD AND ANN K. BLANC (1990) FERTILITY LEVELS AND TRENDS,
DEMOGRAPHIC AND HEALTH SURVEYS, COMPARATIVE STUDIES NO. 2

FIGURE 4

INFANT MORTALITY RATE AND TOTAL FERTILITY RATE BY REGION OR COUNTRY

REGION OR COUNTRY	INFANT MORTALITY RATE ^a	TOTAL FERTILITY RATE ^b
SUB-SAHARAN AFRICA	100	6.5
NIGERIA	84	6.6
ETHIOPIA	127	7.5
TANZANIA	104	6.4
SOUTHERN ASIA	96	4.4
INDIA	91	3.9
PAKISTAN	109	6.7
PHILIPPINES	43	4.1

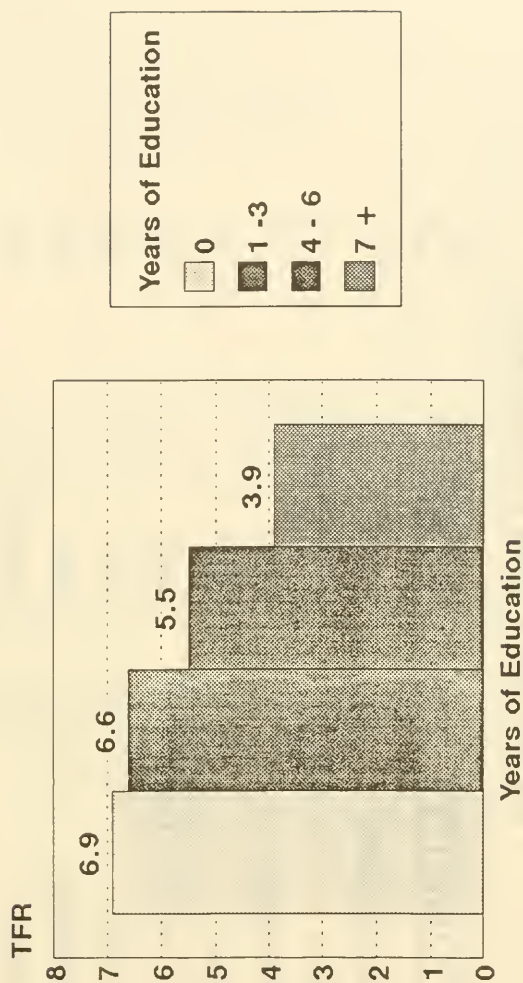
^a Infant deaths per 1,000 live births.

^b Average number of children born to a woman during her lifetime.

SOURCE: 1993 World Population Data Sheet, Population Reference Bureau, Washington, DC.

FIGURE 5

Total Fertility Rate for Ages 15-49 by Years of Education for Thirty Developing Countries



Sources: Ashurst, Balkaran and Casterline (1984)

"Fertility Behaviour in the Context of Development: Evidence from the World Fertility Survey,"
United Nations (New York: 1987)

% OF HOUSEHOLDS HEADED BY FEMALES FOR RECENT YEARS*

<u>COUNTRY</u>	<u>YEAR</u>	<u>%</u>
Bangladesh	1981	17
Peru	1985	17
Thailand	1980	17
Brazil	1987	21
Dominican Rep.	1980	22
Kenya	1980	24
Rwanda	1978	25
Ghana	1987-88	29
Jamaica	1990	42
Botswana	1992	50

*** Largely households without adult male**

SOURCES: SEF OVER

SOURCES:

For Bangladesh, Rwanda, and Thailand: "Compendium of Statistics and Indicators on the Status of Women." 1986. UN Department of International Economics and Social Affairs/Statistical Office. Series K, No. 5.

For Brazil: Altimar, Oscar. 1984. "Income Distribution and Child Welfare in Latin America: A Comparison of pre- and post-recession data." World Development 12, 3: 26-82.

For Jamaica: LSMS

For Peru and Dominican Republic: Rosenhouse, Sandra. 1989. "Identifying the Poor: Is Headship a Useful Concept?" Living Standards and Measurement Study, Working Paper No. 58.

For Botswana: Lloyd, Cynthia B. and Sonalde Desai. 1992. "Children's Living Arrangements in Developing Countries," Joint Population Council/International Center for Research on Women Working Paper.

FIGURE 7

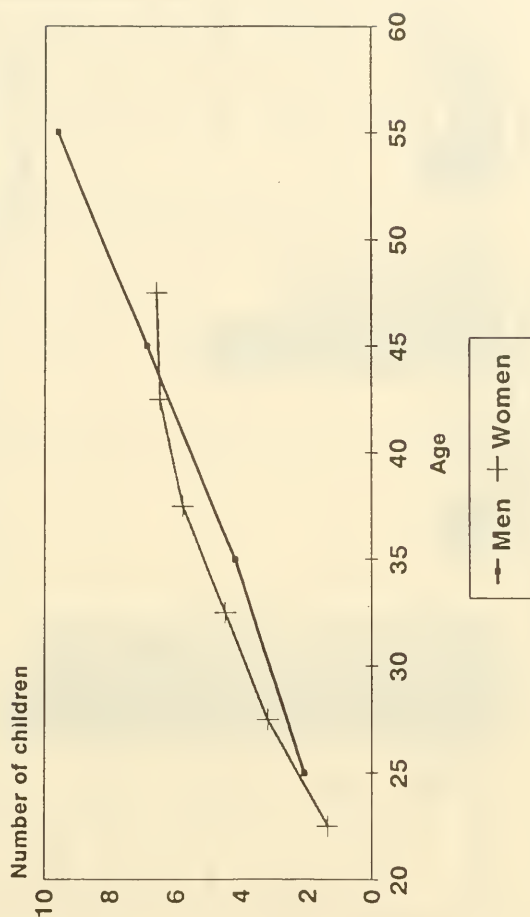
PROPORTION OF A WOMAN'S REPRODUCTIVE YEARS (15-49) SPENT WITHOUT HUSBAND IN RESIDENCE*

<u>COUNTRY</u>	<u>YEAR</u>	<u>%</u>
MALI	1987	19.5
SENEGAL	1986	32.8
KENYA	1988	43.1
GHANA	1988	50.1

* Includes unmarried, divorced, widowed, married with spouse living apart

SOURCE: JUDITH BRUCE AND CYNTHIA LLOYD (1992). "FINDING THE TIES THAT BIND: BEYOND HEADSHIP AND HOUSEHOLD." PC/ICRM WORKING PAPER ON "FAMILY STRUCTURE, FEMALE HEADSHIP AND MAINTENANCE OF FAMILIES AND POVERTY."

Mean Number of Living Children Among Married Men and Women Kenya, 1989



SOURCE: BLANC, ANN. 1993. "DETERMINING MALE FERTILITY THROUGH SURVEYS: THE DIS EXPERIENCE." PRESENTED AT THE GENERAL CONFERENCE OF THE INTERNATIONAL UNION FOR THE SCIENTIFIC STUDY OF POPULATION.



FIGURE 9

PERCENT OF CHILDREN POTENTIALLY VULNERABLE
DUE TO MOTHER'S MARITAL SITUATION
AND LIVING ARRANGEMENTS

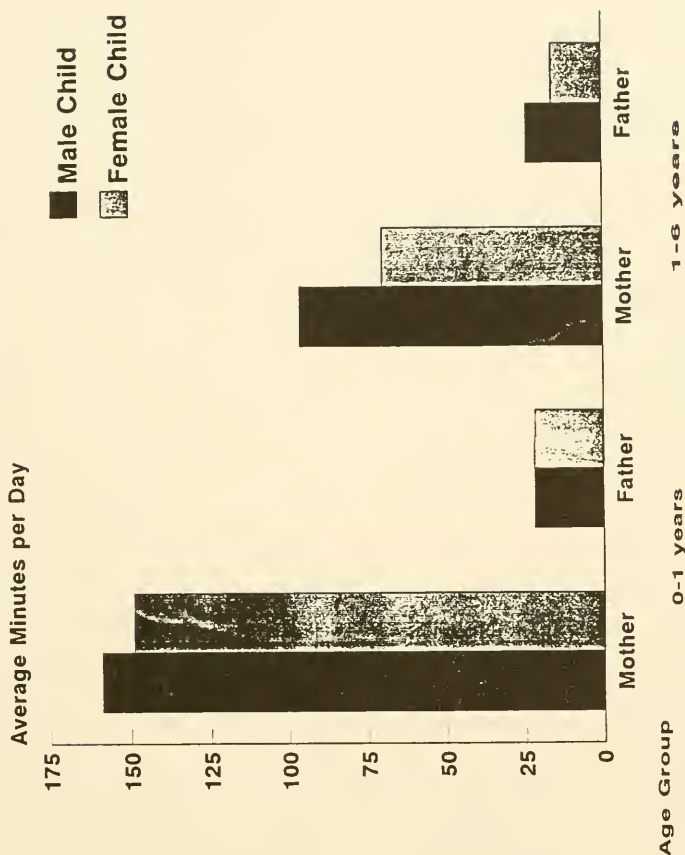
	Not Currently Married	No Resident Partner	Polygamous Union	Consensual Union	Mother Household Head	Female Headed Household	Mother Recent Migrant
Botswana	40.8	54.0	--	16.4	29.9	49.7	--
Ghana	10.2	37.0	31.8	6.2	19.7	32.5	18.5
Zimbabwe	11.3	36.8	15.0	--	28.2	35.4	30.6
Morocco ^a	4.3	--	5.0	--	6.7	9.3	22.3
Colombia	13.5	--	--	32.4	7.1	13.1	24.1
Peru	9.3	--	--	27.0	11.3	--	9.7

^a Only ever-married women interviewed.

SOURCE: Lloyd, Cynthia B. and Sonalde Desai. 1992. "Children's Living Arrangements in Developing Countries," Joint Population Council/International Center for Research on Women Working Paper.

FIGURE 10

AVERAGE TIME SPENT PER DAY PER CHILD BY RURAL PARENTS



Source: Navera, Emeline, 1978, Philippines.

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